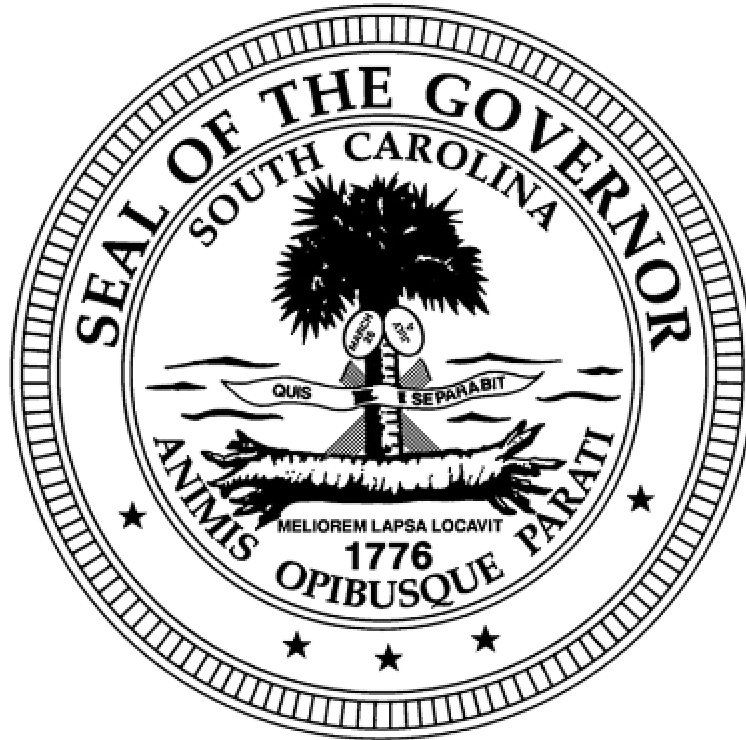


# State of South Carolina



## Community Services Block Grant CFDA #93.569 FY 2006 State Plan

### Governor's Office of Economic Opportunity

Ashlie Lancaster, OEO Director  
Bertie A. McKie, Senior Manager for Community Services

"Helping People. Changing Lives."

**MARK SANFORD**  
**GOVERNOR**

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## **FY 2006 State Plan Major Changes and Highlights**

Below is an explanation of the major changes and highlights to the FY 2006 State Plan (which become effective January 1, 2006), when compared to the FY 2005 State Plan:

- **Corrective Action and Suspension of Funding:** Section has been revised
- **General Emergency Assistance Program (GEAP):** Assistance may be provided only once during the program year to an eligible household
- **State Discretionary Projects:** The discretionary funds are being offered to all community action agencies for the implementation of a Youth Leadership Program (YLP) only and should be included in the FY 2006 Work Plan as a project. YLP section of this Plan has been revised.
- **Semi-Annual Report:** Due to OEO by July 15, 2006
- **Annual Report:** Being replaced with federally mandated IS Report and due to OEO by February 15, 2006
- **Fiscal Accountability:** Appendix K added – outlines new payment schedule for CSBG disbursements
- **Audit Requirements:** New section has been added to this Plan
- **Independent, Single Audit Review and Appeals Procedures for Nonprofit Organizations F08-01 (Revised):** New information pertaining to incumbent auditors and the submission of the agency's independent audit report
- **OEO Audit Report Review:** Revised with new requirements
- **Submission of the FY 2004 Independent Audit Report (or letter from auditor indicating anticipated completion date):** Requirement added to eliminate redundancy of receiving audits already on file with OEO
- **Organizational Charts:** Must include names and positions

Questions regarding this State Plan should be directed to OEO's CSBG staff:

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Program Coordinators:

Anthony Buzzetti (803) 734-0683

Margaret Stevenson (803) 734-1266

Stephen Pulos (803) 734-0684

## **I INTRODUCTION**

The State of South Carolina shall administer a statewide anti-poverty program in accordance with the Community Services Block Grant Act through funds allocated by the Secretary of the U.S. Department of Health and Human Services (HHS). This program shall be identified in South Carolina as the Community Services Block Grant (CSBG) Program.

In FY 2005, HHS appropriated \$626,722,641 to states for CSBG. Of that, \$9,746,452 was awarded to the State of South Carolina for CSBG programs.

The Governor's Office of Economic Opportunity (OEO) administers the South Carolina CSBG Program and a network of fifteen (15) community action agencies delivers services to every county in the State. Working in partnership with the community action agencies, OEO will fund services and activities designed to have a measurable reduction on poverty-related conditions and promote the development of social and economic self-sufficiency among low-income individuals, particularly families who are attempting to transition from poverty.

CSBG service categories include employment, education, self-sufficiency, income management, housing, emergency services, nutrition, health and safety and linkages.

In FY 2006, the focus for South Carolina Results-Oriented Management and Accountability (SCROMA), the State's client management software system, will include long-range development and improved customization for better tracking and outcomes reporting. Efforts will also include targeted training of CAA system administrators to encourage network ownership and to increase system use for live intake by agency program staff.

### **A. STATUTORY AUTHORITY**

#### **1. STATE STATUTORY AUTHORITY**

The General Assembly of South Carolina enacted the "Community Economic Opportunity Act of 1983," Act 143 of the 1983 South Carolina Code of Laws. The law became effective June 17, 1983. **The Office of the Governor, Office of Economic Opportunity (OEO), 1205 Pendleton Street, Columbia, South Carolina 29201, (803) 734-0662**, was designated as the State's administering agency for the Community Services Program under a provision of this law.

The State of South Carolina shall administer the Community Services Block Grant Program (herein referred to as CSBG) in accordance with the following federal statutory authorities.

#### **2. FEDERAL STATUTORY AUTHORITY**

- Title VI, Subtitle B, of the Omnibus Budget Reconciliation Act of 1981 (PL 97-35, as amended), which is also cited as "Community Services Block Grant Act," and is herein referred to as the "Act".
- Augustus Hawkins Human Services Reauthorization Act of 1984 (PL 98-558); Reauthorization Act of 1986 (PL 99-425) and Reauthorization Act of 1990 (PL 101-501), as amended.
- FY 1996 CSBG Appropriation Legislation (PL 104-134); C.F.R. Title 45, Part 96.
- Community Opportunities, Accountability, and Training and Educational Services Act of 1998 or the Coats Human Services Reauthorization Act of 1998 (PL 105-285); Department of Health and Human Services Block Grant Regulations, Current Poverty Income Guidelines; The Community Services Block Grant Act (42 U.S.C. 9901 et seq., as amended); The Community Services Block Grant Amendments of 1994, and Human Services Amendments of 1994, (PL 103-252).

The Act authorizes the Secretary of the U.S. Department of Health & Human Services (HHS) to make grants to states *for the reduction of poverty, the revitalization of low-income communities, and the empowerment of low-income families in rural and urban areas to become fully self-sufficient (Sec. 672(1))*. The CSBG funds were first made available to states in Fiscal Year 1982 and are expected to continue to be available through Fiscal Year 2006.

## **B. PURPOSE**

In FY 2006, the State of South Carolina will fund projects designed to reduce the conditions of poverty, which affect those persons with incomes at or below the poverty level. The Office of Economic Opportunity will issue guidelines for eligibility of such persons.

South Carolina has approximately 547,869 (2000 Data, U.S. Department of Commerce, Bureau of the Census, STF 3 Profile Table) persons who live on incomes at or below the poverty level as established by the federal government. The needs of these individuals encompass the entire range of life necessities including health, education, employment, and housing. The severity of need and kinds of poverty-related conditions vary from community to community.

To accomplish anti-poverty goals, yet allow for maximum flexibility among agencies in meeting locally identified needs, the State shall require that CSBG funds be used for projects having a measurable and potentially major impact on the causes of poverty in the local community using a community action plan which shall include:

1. a current, annual community needs assessment;
2. a description of the service delivery system targeted to low-income individuals and families in the service area;
3. a description of how linkages, to the maximum extent possible, will be developed with other organizations including faith-based, charitable groups, and community organizations to fill identified gaps in services through information, comprehensive case management, and follow-up consultations;
4. a description of how funding under the Act will be coordinated with other public and private resources; and
5. a description of outcome measures to be used to evaluate success in promoting self-sufficiency, family stability and community revitalization.

## **II. THE NARRATIVE STATE PLAN**

### **A. ADMINISTRATIVE STRUCTURE**

#### **1. OEO Mission and Responsibilities**

- a. The mission of the OEO is to expand awareness of our human service programs throughout the State of South Carolina; implement and maintain technical support for our service agencies in the areas of moving eligible families, including the elderly and disabled, from their current economic condition to a desire to be stabilized and ultimately to become self-sufficient.

The OEO is charged with specific responsibilities, which collectively provide for the coordination of resources to address the needs of the economically and socially disadvantaged citizens of South Carolina. The OEO is responsible for administering, supervising and monitoring those matters pertaining to these programs: Community Services Program, Emergency Shelter, Community Food and Nutrition, Low-Income Home Energy Assistance, Weatherization and Project SHARE funded operations in South Carolina. The OEO is the state's contact for the Stewart B. McKinney Act for Emergency Shelter Grant funds and is responsible for the dissemination of homeless information throughout the state.

The OEO shall administer the Community Services Program in accordance with the State Plan, State and Federal statutes and other policies and interpretations as may be required by appropriate State or Federal authorities.

The OEO, through Grant Agreements with eligible Subgrantees, will carry out the services and activities necessary to comply with Section 675(c)(1) of the Act. OEO's minimum responsibilities as the state administering agency are:

1. Development of the State Plan and of the CSBG fund distribution process;
2. Establishment of program policies and operational procedures;
3. Development of accounting policies and procedures;
4. Development of fiscal procedures, including required audits;
5. Procedures for record maintenance and for supporting documentation;
6. Issuance of policies and procedures for compliance with Act 143 of 1983, South Carolina Code of Laws, referenced as the "Community Economic Opportunity Act of 1983", as amended;
7. Review and approval of Subgrantee work programs;
8. Determination of Subgrantee eligibility;

9. Issuance of grants;
10. Monitoring of the program throughout the state;
11. Technical assistance and training;
12. Evaluation of Subgrantee agency program performance and identification of remedial procedures;
13. Reporting of program data.

**b. OEO's Outcome Statements and Performance Targets**

*The CSBG outcome statements, performance targets, and activities/milestones for the State of South Carolina for FY 2006 are as follows:*

**Outcome Statement 1:** To fund anti-poverty programs and activities that will, as a result, achieve measurable improvement in the overall lives of clients, their households, and communities of South Carolina's low-income populations; utilizing comprehensive case management best practices for eligible families and individuals served, as feasible. To achieve this goal, the State establishes the following objectives:

Performance Target 1: *As a prerequisite to the continuation of existing programs and/or new program development and implementation, each Subgrantee must conduct a current year-to-date CSBG Program Evaluation.*

Activity/Milestone 1: Using the Subgrantee Semi-Annual Narrative Report, each Subgrantee must evaluate the current program year Performance Targets (Objectives) and outline proposed revisions for the coming year; revisions needed to improve project outcome(s). The Program Evaluation must be completed and submitted to OEO by July 15, 2006.

Performance Target 2: *Using a variety of mechanisms to solicit information, as a prerequisite to continuation of existing programs and/or new programs, each Subgrantee must conduct an annual needs assessment within and reflective of the needs and conditions of the respective service area to include each county served. Data sources must be included, current and clearly cited.*

Activity/Milestone 2: Each Subgrantee must submit a current Needs Assessment along with the Work Plan. The current Needs Assessment should identify the need and community involvement and should avoid duplication of services when possible (Appendix B).

Performance Target 3: *To fund programs to achieve self-sufficiency.*

Activity/Milestone 3: Ensure that subgrantees provide services related to the needs of low-income families and individuals, so that these services may have a measurable and potentially major impact on the causes of poverty in the community and may help the families and individuals to achieve self-sufficiency.

Performance Target 4: *To fund programs that will decrease the State's current unemployment rate and the number of underemployed persons in the low-income population.*

Activity/Milestone 4: Subgrantees provide programs which will create sustainable employment and increase earned income opportunities. Any employment projects submitted to the OEO, to include the use of CSBG funds, must include current written coordination, and are required to be a One-Stop Partner under the Workforce Investment Act (WIA), with local offices of the State Employment Security Commission in the Subgrantee's area. Roles and responsibilities must be outlined. Each Subgrantee's referral arrangements/coordination plans shall be documented in the Work Program. Evidence of referrals and coordination shall be clearly cited in client files.

Performance Target 5: *According to the 2000 U.S. Census (Table DP-2), South Carolina has over 600,000 people, aged 25 years/older, without a high school diploma. It is the State's intent to only fund programs designed and/or proven to increase the number of persons in the low-income population that obtain an adequate education in order that they may begin to progress and ultimately attain self-sufficiency.*

Activity/Milestone 5: Subgrantees provide programs that will provide definitive evidence of actually assisting young persons and uneducated/undereducated adults in completing their education. Uneducated/undereducated and illiterate adults should also be targeted for assistance. Any educational project is encouraged to include current written coordination with local school district and any state technical and/or vocational schools in the Subgrantee's area. Roles and responsibilities are to be defined to

prevent the duplication of services. Each Subgrantee's referral arrangements/coordination plans shall be documented in the Work Program. Evidence of referrals and coordination shall be clearly cited in client files.

Performance Target 6: *To fund programs that will decrease the number of persons in the low-income population residing in substandard housing.*

Activity/Milestone 6: Subgrantees provide program opportunities that will assist low-income persons in securing and maintaining new and/or safe and affordable housing. Any housing project must include current written coordination with local housing authorities, municipalities, county governments or any other organizations that are involved in service area housing programs.

Performance Target 7: *To fund programs that will ameliorate the immediate, adverse affects of malnutrition and health-related issues for low-income persons.*

Activity/Milestone 7: Subgrantees provide programs to help reduce the adverse affects of health-related issues and increase the availability of nutritional food sources, while improving nutritional skills. Nutrition project may include current written coordination with faith-based organizations, other community organizations, local offices of the Agricultural Extension Services of Clemson University and the South Carolina Department of Social Services in the Subgrantee's service area. Each Subgrantee's referral arrangements/coordination plans shall be documented in the approved Work Program.

Performance Target 8: *To fund support programs that provide energy assistance and improve home energy and income management skills to decrease the number of low-income persons adversely affected by the cost of home energy.*

Activity/Milestone 8: Subgrantees provide staff support programs in accordance with OEO-approved Low-Income Home Energy Assistance Program (LIHEAP) Operational Plans, designed to improve home energy and income management skills and provide energy assistance for program-eligible households. CSBG support for energy projects must be coordinated with the OEO LIHEAP. Each Subgrantee's referral arrangements/coordination plans shall be documented in the approved Work Program and evidence of referrals and coordination shall be clearly documented in client files.

**Outcome Statement 2:** To fund emergency assistance programs for the low-income population to stabilize crisis situations for potentially vulnerable clients and their households.

Performance Target 1: *Subgrantees create an Emergency Assistance Program which provides aid to meet urgent and immediate individual family needs.*

Activity/Milestone 1: Emergency Assistance Programs, submitted to the OEO for funding through CSBG, should include current written coordination with faith-based organizations, other community organizations, the local Department of Social Services, United Way, and appropriate private and public organizations that are engaged in the provision of emergency aid in the service area; thereby providing entire households with other agency-area programs and services creating opportunities for increased overall stability and self-sufficiency (refer to Section E 2). Each Subgrantee's referral arrangements/coordination plans shall be documented in the approved work program. The State will allocate at least seven and one-half percent (7.5%) of the total State allocation for Outcome Statement 2.

**Outcome Statement 3:** The State will assist in the coordination of CSBG projects with other governmental, social service, faith-based organizations and other community organizations to access program eligible data. Subgrantee Work Plans should outline the coordination efforts of community partners.

Performance Target 1: *To promote an ongoing exchange of authorized information and other data between project operators and related State and Federal human service agencies, including, but not limited to: The U.S. Department of Health and Human Services, the South Carolina Department of Social Services, the South Carolina Department of Health and Human Services, the U.S. Department of Housing and Urban Development, and the South Carolina Employment Security Commission. The purpose of the information exchange is to coordinate project activities for maximum efficiency and effectiveness and prevent the duplication of service within the local service area.*

Activity/Milestone 1: The State will:

- a. Ensure linkages between agencies are established;



- b. Continue to facilitate the implementation of the SCROMA Reporting System thereby enhancing the communication among agencies for the provision of services to participants and avoiding duplication of effort;
- c. Identify growth in agency and State collaborations which result in moving participants and their households toward self-sufficiency; and
- d. Ensure that, as a result of the CSBG funds invested, non-monetary assistance programs that require the use of other funds and resources are well documented and demonstrate a move toward increased self-sufficiency for clients and their households.

**Outcome Statement 4:** The State will ensure funded activities are producing measurable results through effective administration. The State will provide ongoing technical assistance and training to ensure proper process evaluation for desired results.

**Performance Target 1:** *The State will monitor and evaluate the performance of the Subgrantees in the implementation and completion of all CSBG projects in accordance with state and national monitoring guidelines.*

Activity/Milestone 1:

- a. The OEO will conduct a minimum of two monitoring visits to each Subgrantee during the period January 1, 2006 through December 31, 2006.
- b. The OEO may conduct a formal, in-depth evaluation of CSBG projects through a team monitoring visit and SCROMA database analysis which will assess overall performance in resource allocation, fiscal and program implementation and operations.

**Outcome Statement 5:** The State will ensure that eligible entities are beginning to increase the availability of local, public and private funds, and in-kind dollars by program year-end.

**Performance Target 1:** *Subgrantees will develop and implement a plan to expand partnerships and other collaboratives to further increase public and private resources.*

Activity/Milestone 1: Each Subgrantee must provide the OEO performance targets and activity/milestones for increasing agency capacity by program year-end.

**Outcome Statement 6:** The State will assist in assuring board compliance.

**Performance Target 1:** *The State will conduct a complete review of each agency's board of directors to ensure compliance with state and federal law. When out of compliance, the OEO will provide technical assistance to the Subgrantee to ensure that boards are in compliance, properly structured and fully participating in the development, implementation and evaluation of agency programs to serve low-income communities.*

Activity/Milestone 1: With the submission of the FY 2006 Work Plan, Subgrantees will provide the OEO an updated current board of directors and standing committees' rosters and completed board composition forms. Subgrantees will submit to the OEO a set of minutes for each board meeting no later than thirty (30) days following the approval of the minutes. Changes in composition are to be reported by the Board Chairperson to the OEO within thirty (30) days of the change.

**Performance Target 2:** *The State will conduct a complete review of each agency's board by-laws to ensure compliance with state and federally required tripartite board structure and other pertinent information such as duties of the executive director, board officers and members, filling vacancies, and process for electing board members, especially representatives of the poor.*

Activity/Milestone 2a: Subgrantees will provide the OEO a current copy of the board's bylaws and policies and procedures manual along with the Work Plan.

Activity/Milestone 2b: Subgrantees will provide the OEO a description of the process used to identify and select local board members, including business representatives along with the Work Plan.

Activity/Milestone 2c: Subgrantees will provide the OEO copies of nomination letters that document board representatives are nominated by the appropriate organizations, entities, or agencies along with the Work Plan.

## 2. Eligible Entities

- a. **FY 2006 Eligible Entities** - The OEO will accept applications for FY 2006 funds only from Eligible Entities that are listed on the CAA Directory below. The OEO may exclude any of the eligible entities which have not complied with the criteria and policies established by the OEO. The Office of the Governor shall, in accordance with Federal or State legislation, extend the geographic service area as necessary to other eligible entities in order to permit the more effective provision of services.
- b. **Eligible Entities (Subgrantees) Responsibilities** - The OEO will make grants to Subgrantees to carry out the services and activities necessary to comply with Section 675C(a)(1) of the Act. The following minimum responsibilities shall be included in each grant agreement:
  1. Reporting of program and fiscal data when and as required by the OEO;
  2. Maintenance of an accounting system which provides adequate documentation of payments and costs, with supporting fiscal records in accordance with policies issued by the OEO and OMB circulars;
  3. Establishment of internal monitoring checks and balances for each project to assure that only eligible clients are served; assistance is appropriate; procedures are established to serve the elderly and the disabled; and that outcomes are achieved;
  4. Assistance in the conduct of and participation in any hearing, termination proceeding, inspection, audit or evaluation of any aspect of the program;
  5. Provide an annually approved HHS or OEO Indirect Cost Rate;
  6. Adherence to policies and procedures issued by the OEO;
  7. Adherence to administrative procedures issued by the OEO;
  8. Adherence to the provisions of the State Plan and instructions associated with the Act issued by the OEO;
  9. Employment of key project staff appropriate for the conduct of respective projects;
  10. Maintenance of program records;
  11. Safeguarding of the assets of the Community Services Block Grant;
  12. Securing of fidelity bonding and such other insurance coverage as outlined in the grant agreement;
  13. Compliance with OEO grant agreements;
  14. Completing timely corrective actions to remedy errors and/or problems identified by the OEO;
  15. Compliance with the requirements for equal opportunity, affirmative action, civil rights protection and for the handicapped as may be prescribed in state or federal regulations; and
  16. Compliance with policies issued by the OEO associated with Act 143 of 1983, South Carolina Code of Laws, referenced as the "Community Economic Opportunity Act of 1983", as amended.
- c. **General Requirements** - All eligible entities that apply for Fiscal Year 2006 CSBG funds shall comply with the following requirements:
  1. Shall serve a targeted service area as defined in the Glossary of Key Terms (Appendix A);
  2. Must have experience in successfully operating projects impacting on the social and economic causes of poverty;
  3. Must have an acceptable financial management system and an independent audit in compliance with OMB Circulars A-87, A-110, A-122, and A-133;
  4. Must have an approved Indirect Cost Rate;
  5. Must have a tripartite Board of Directors (Section D. 3. Tripartite Boards);
  6. Must have a valid charter as a 501(c) nonprofit organization from the South Carolina Secretary of State or otherwise be legally constituted by state law; and
  7. Must have thoroughly organized, implemented, and specifically reported the National Indicators of Community Action Performance in the proposed Work Plan (see Appendix F-2).
  8. Must have accurately completed and timely submitted the most recent Community Services Block Grant Information System (CSBG/IS) Survey.

***Results-Oriented Management and Accountability (ROMA) System*** - Eligible entities will participate in and comply with the ROMA System, which the Secretary facilitated development pursuant to Section 678E, utilizing SCROMA and provide a description of specific measures to be used to substantiate the outcomes of each funded program and eligible entity performance in promoting self-sufficiency, family stability, and community revitalization.

**FY 2006 ELIGIBLE ENTITIES – COMMUNITY ACTION AGENCIES**

**DIRECTORY OF SOUTH CAROLINA COMMUNITY ACTION AGENCIES**

**Aiken/Barnwell Counties Community Action Commission, Inc.**

291 Beaufort Street, N.E., Post Office Box 2066

Aiken, SC 29802-2066

**PHONE: (803) 648-6836 FAX: (803) 649-1588**

**Satellite Offices:**

650 Knox Abbott Dr., Cayce, SC 29033 (803) 794-6778

Litchfield Apt. Complex, Barnwell, SC 29812 (803) 259-3145

Ms. Sharon Dallas, CSBG and LIHEAP (Lexington/Barnwell)

650 Knox Abbott Dr., Cayce, SC 29033

(803) 794-6778 Fax: (803) 794-7144

**Counties Served:** Aiken, Barnwell and Lexington

**Mr. George A. Anderson, Executive Director**

Ms. Marieanne Petersen, **CSBG & LIHEAP**

Mr. William Clark, **FISCAL**

Mr. Nick Adams, **WAP**

**BOARD CHAIRPERSON:**

Mr. James Milledge (803) 649-0458

344 Hill Ave., Aiken, SC 29801

**WAP Counties:** Aiken/Allendale/Bamberg/Richland/  
Barnwell/Calhoun/Greenville/Hampton/Lexington

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**Beaufort-Jasper Economic Opportunity Commission, Inc.**

1905 Duke Street, Suite 250, Post Office Drawer 9

Beaufort, SC 29901-0009

**PHONE: (843) 470-4500 FAX: (843) 470-4510**

**Satellite Office:**

419 Jacob Smart Blvd., Ridgeland, SC 29936 (843) 726-5586

**Counties Served:** Beaufort and Jasper

**Mr. Leroy H. Gilliard, Executive Director**

Ms. Sarah Marshall, **CSBG & LIHEAP (470-4507)**

Ms. Elizabeth Williams, **FISCAL (470-4509)**

**BOARD CHAIRPERSON:**

Ms. Agnes Garvin (843) 470-3753

PO Drawer 1228, Beaufort, SC 29901

**WAP:** For Weatherization assistance call  
(843) 724-6760

---

**Berkeley-Dorchester Co. Econ. Develop. Corp.**

4 Belt Drive, Post Office Box 609

Moncks Corner, SC 29461

**PHONE: (843) 761-8244 FAX: (843) 719-3091**

**Satellite Offices:**

128 Pressley Ave., Summerville, SC 29461 (843) 851-0034

121 A South Metts St., St. George, SC 29477 (843) 563-2318

**Ms. Patsy Gardner, Interim Executive Director**

Ms. Carolyn Jamison, **FISCAL** (843) 719-3056

**BOARD CHAIRPERSON:**

Mr. Willie Davis (843) 549-1858

170 Carn Street, St. George, SC 29477

**LIHEAP and WAP:** For LIHEAP and/or  
Weatherization assistance call (843) 724-6760

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**Carolina Community Actions, Inc.**

138 S. Oakland Avenue, Post Office Box 933

Rock Hill, SC 29731-6933

**PHONE: (803) 329-5195 FAX: (803) 329-5198**

**Satellite Offices:**

234 Johnston St., Rock Hill, SC 29731 (803) 366-5537

2010 Pageland Hwy., Lancaster, SC 29720 (803) 285-2034

109 McAliley St., Chester, SC 29706 (803) 385-5205

101 N. Congress St., Winnsboro, SC 29180 (803) 635-3606

**Counties Served:** Chester, Fairfield, Lancaster, Union and York

**Mr. Walter H. Kellogg, Executive Director**

Ms. Mary Reid, **CSBG and LIHEAP**

Ms. Karen Kee, **FISCAL**

Mr. Austin White, **WAP** (803) 366-6373

**BOARD CHAIRPERSON:**

Brother David Boone

PO Box 11586, Rock Hill, SC 29731

**WAP Counties:** Chester/Fairfield/Lancaster/  
Union/York

---

**Charleston County Human Services**

1069 King Street, Post Office Box 20968

Charleston, SC 29413

**PHONE: (843) 724-6760 FAX: (843) 724-6787**

**Satellite Offices:**

**Mr. Arnold Collins, Executive Director**

Ms. Reba Hough-Martin, **CSBG** x24

Ms. Sherri McClain-Brown, **FISCAL** x34

Ms. Tammy McCrackin, **LIHEAP** x15

Mr. Ken McClellan, **WAP** x32

3742 Hwy. 17 N., Mt. Pleasant, SC 29464 (843) 216-0843  
3351 Maybank Hwy., Johns Island, SC 29455 (843) 559-2458  
4790 Hassell St., N. Chas., SC 29406 (843) 554-1176  
**County Served:** Charleston

**BOARD CHAIRPERSON:**  
Mr. Willi Glee (843) 571-2882 (H)  
2311C Tall Sail Drive, Charleston, SC 29414  
**WAP Counties:** Beaufort/Charleston/Jasper/  
Berkeley/Colleton/Dorchester

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**Chesterfield-Marlboro Econ. Opp. Council, Inc.**  
318-322 Front Street, P. O. Box 877  
Cheraw, SC 29520  
**PHONE: (843) 320-9760 FAX: (843) 320-9771**

**Satellite Offices:**

405 Gum St., Pageland, SC 29728 (843) 672-6723  
205 E. Market St., Bennettsville, SC 29512 (843) 479-2818

**Counties Served:** Chesterfield and Marlboro

**Ms. Helen V. Palmer, Executive Director** x109  
Ms. Gloria McFarlan, **CSBG** x104  
fax (843) 320-9769  
Ms. Deborah Clyburn, **FISCAL** x110  
Ms. Sharon Bennett, **LIHEAP** x112  
**BOARD CHAIRPERSON:**  
Ms. Cassandra Bass (843) 921-1010  
225 Bass Street, Cheraw, SC 29520

**WAP:** Chesterfield/Darlington/Dillon/Marlboro

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**Darlington Co. Community Action Agency**  
904 S. Fourth St., Hartsville, SC 29550  
**PHONE: (843) 332-1135 FAX: (843) 332-3971**

**Satellite Offices:**

223 Hall St., Society Hill, SC 29593 (843) 378-4571  
223 Law Plantation Rd., Darlington, SC 29532 (843) 393-4049  
Grooms Bldg., Main St., Lamar, SC 29069 (843) 326-5430  
**County Served:** Darlington

**Dr. Alvin T. Heatley, Executive Director** x105  
Ms. Rosa McLeod, **CSBG & LIHEAP** x101  
Ms. Beulah Mumford, **FISCAL** x106

**BOARD CHAIRPERSON:**

Mr. M. L. Rush (843) 378-4763  
PO Box 420, Society Hill, SC 29593

**WAP:** For Weatherization assistance call  
(843) 320-9760

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**GLEAMNS Human Resources Comm., Inc.**  
237 Hospital Street, Post Office Box 1326  
Greenwood, SC 29648  
**PHONE: (864) 223-8434 FAX: (864) 223-9456**

**Satellite Offices:**

Suber St., Newberry, SC 29138 (803) 276-6865  
Saluda Cty Courthouse, Saluda, SC 29108 (864) 445-2971  
209 Pridmore St., Laurens, SC 29360 (864) 984-5123  
400 Church St., Edgefield, SC 29824 (864) 637-4030  
706 Carolina Circle, Abbeville, SC 29620 (864) 459-2100  
County Bldg., McCormick, SC 29835 (864) 465-2662  
**Counties Served:** Abbeville, Edgefield, Greenwood  
Laurens, McCormick, Newberry and Saluda

**Dr. J. D. Patton, III, Executive Director** x1002  
Ms. Jan Owens, **CSBG** x1046  
Ms. Annie Burton, **LIHEAP** x1040  
Ms. Sandra Taylor, **FISCAL** x1042  
Mr. Ken McClendon, **WAP**

**BOARD CHAIRPERSON:**

Mr. Claude Thomas (864) 942-8631  
456 Grey Rock Estate Road, Abbeville, SC 29620

**WAP Counties:** Abbeville/Anderson/ Newberry/  
Edgefield/Greenwood/Laurens/McCormick/  
Oconee/Pickens/Saluda

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**Lowcountry Community Action Agency, Inc.**  
319 Washington Street, Post Office Box 1726  
Walterboro, SC 29488  
**PHONE: (843) 549-5576 FAX: (843) 549-2190**

**Satellite Office:**

406 Hoover Street, Hampton, SC 29924 (803) 943-3561

**Counties Served:** Colleton and Hampton

**Mr. Leroy Womble, Executive Director**  
Ms. Emily Mitchell, **CSBG and LIHEAP** x25  
Ms. Arlene Williams, **FISCAL** x26

**BOARD CHAIRPERSON:**

Mr. Prince Tucker (843) 835-2232  
103 Wesley Chapel Ave., Cottageville, SC 29435

**WAP:** For Weatherization assistance in Colleton  
County call (843) 724-6760; Hampton County  
call (803) 648-6836

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**Orangeburg-Calhoun-Allendale-Bamberg (OCAB) CAA**  
1822 Joe Jeffords Highway, Post Office Drawer 710

**Mr. Calvin Wright, Executive Director**  
Mr. Marion Jamison, **CSBG & LIHEAP** x124

Orangeburg, SC 29116-0710  
**PHONE: (803) 536-1027 FAX: (803) 536-4657**

**Satellite Offices:**

Lake Inspiration, St. Matthew, SC 29135 (803) 874-2936  
1124 Bay St., Allendale, SC 29810 (803) 584-3845  
820 Bowman Branch Rd., Bowman, SC 29018 (803) 829-2701  
6194 Neeses Hwy., Neeses, SC 29107 (803) 247-2691  
111 N. Main St., Bamberg, SC 29013 (803) 245-5901  
122 E. Coker St., Denmark, SC 29042 (803) 793-4373  
1515 Brant Avenue, Holly Hill, SC 29059 (803) 496-5370  
**Counties Served:** Allendale, Bamberg, Calhoun, Orangeburg

Ms. Dietrich Shuler, **FISCAL** x106

**BOARD CHAIRPERSON:**

Ms. Brenda Williams (803) 533-2450  
3000 St. Matthews Rd., Orangeburg, SC 29115

**WAP:** For Weatherization assistance in Orangeburg  
County call (803) 775-4354; in Allendale, Bamberg  
and Calhoun counties call (803) 648-6836

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**Pee Dee Community Action Agency**

2685 South Irby Street, Post Office Drawer 12670  
Florence, SC 29505  
**PHONE: (843) 678-3400 FAX: (843) 678-3404**

**Satellite Offices:**

1608-B Hwy. 301 N., Dillon, SC 29536 (843) 774-9038  
209 Railroad Ave., Marion, SC 29571 (843) 423-6711  
209 Graham Rd., Lake City, SC 29536 (843) 394-7440  
**Counties Served:** Dillon, Florence and Marion

**Mr. Walter Fleming, Executive Director**

Mr. Freddie Jolley, **CSBG** x124  
Ms. Alberta Durant, **FISCAL** x119  
Ms. Queen McCall, **LIHEAP** x121

**BOARD CHAIRPERSON:**

Mr. Jasper Eaddy (843) 423-3801  
P. O. Box 581, Marion, SC 29571

**WAP:** For Weatherization assistance in Dillon  
County call (843) 320-9760; in Florence and  
Marion counties call (803) 775-4354

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**Piedmont Community Actions, Inc.**

300A South Daniel Morgan Ave., Post Office Box 5374  
Spartanburg, SC 29304  
**PHONE: (864) 585-8183 FAX: (864) 515-9397**

**Satellite Offices:**

115 Madison Ave., Gaffney SC 29340 (864) 489-3163

**Counties Served:** Cherokee and Spartanburg

**Mr. John B. Shennan, Jr., Executive Director**

Dr. Joyce Miller, **CSBG** (864-327-1116)  
Ms. Sue Anderson, **FISCAL**  
Ms. Jean Mullinax, **LIHEAP**

**BOARD CHAIRPERSON:**

Mr. Vernon Beatty (864) 583-6203  
PO Box 533, Spartanburg, SC 29304

**WAP Counties:** Cherokee/Spartanburg

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**Sunbelt Human Advancement Resources, Inc.**

1200 Pendleton Street, Post Office Box 10204  
Greenville, SC 29603  
**PHONE: (864) 269-0700 FAX: (864) 295-6151**

**Satellite Offices:**

400 E. River St., Anderson, SC 29624 (864) 224-7028  
121 E. 1<sup>st</sup> St., Easley, SC 29641 (864) 859-2989  
(Anne Holliday-Theberge) x16  
204 N. Fairplay St., Seneca, SC 29678 (864) 882-3495  
**Counties Served:** Greenville, Oconee, Pickens, Anderson

**Dr. Willis H. Crosby, Jr., Executive Director** x230

Ms. Dorothy B. Mims, **CSBG** x233  
Ms. Connie Williams, **FISCAL** x253  
Ms. Betty Cox, **LIHEAP**

**BOARD CHAIRPERSON:**

Dr. Robert E. Dennis (864) 243-3745  
628 New Harrison Bridge Road  
Simpsonville, SC 29680

**WAP:** For Weatherization assistance in Greenville  
County call (803) 648-6836; in Anderson, Oconee  
and Pickens counties call (864) 223-8434

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**Waccamaw Economic Opportunity Council, Inc.**

1261 Hwy. 501 East, Suite B, Post Office Box 1467  
Conway, SC 29528  
**PHONE: (843) 234-4100 FAX: (843)-234-4111**

**Satellite Offices:**

1837 N. Fraser St., Georgetown, SC 29440 (843) 546-6161

**Mr. W. Edward Jordan, Executive Director**

Ms. Emily Cooper, **CSBG/LIHEAP** (843) 355-9922  
Ms. Janice Wideman, **FISCAL**(843)248-4208  
Mr. Leamon Bellamy, **WAP**

**BOARD CHAIRPERSON:**

Ms. Sandra Gowans (843) 488-1283

112 Jackson St., Kingstree, SC 29556 (843) 355-9922  
612 S. Main St., Aynor, SC 29511 (843) 358-1644  
3817 Walnut St., Loris, SC 29569 (843) 756-6562  
929 N., Kings Hwy., Myrtle Beach, SC 29577 (843) 626-7270  
**Counties Served:** Horry, Georgetown and Williamsburg

2000 Fifth Avenue, Conway, SC 29526

**WAP Counties:** Georgetown/Horry/Williamsburg

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**Wateree Community Actions, Inc.**

13 South Main Street, Post Office Box 1838  
Sumter, SC 29151-1838

**PHONE: (803) 775-4354 (Sumter) FAX: (803) 773-9782**

**Satellite Offices:**

32 East Liberty St., Sumter, SC 29150 (803) 773-6512  
2430 Atlas Road, Columbia, SC 29290  
3 W. Boyce St., Manning, SC 29102 (803) 435-4337  
117 Henry St., Eastover, SC 29044 (803) 353-3822  
613 Hwy. 15 S., Bishopville, SC 29010 (803) 484-5401  
637 Rutledge St., Camden, SC 29020 (803) 432-3411  
Richland County Office: (803) 786-4250  
3220 Two Notch Road, Post Office Box 2688  
Columbia, SC 29202

**Dr. Rubye J. Johnson, Executive Director**

Ms. Fredrica Brailsford, **CSBG & LIHEAP**

(803) 773-6512 x311, FAX: (803) 773-7178

Ms. Rebecca Duncan, **FISCAL** x320

Mr. Howard Parnell, **WAP** (803) 773-9716

FAX: (803) 775-9708

**BOARD CHAIRPERSON:**

Mr. George Gibson (803) 453-5280

398 Wilson Street, Mayesville, SC 29104

**WAP Counties:** Clarendon/ Florence/Kershaw

Lee/Marion/Marlboro/Orangeburg/Sumter

**Counties Served:** Clarendon, Kershaw, Lee, Sumter, Richland

updated 06/05

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**B. DESCRIPTION OF CRITERIA AND DISTRIBUTION FORMULA**

1. **ALLOCATION AND DISTRIBUTION OF FUNDS** - A total of ninety (90%) of the State's total CSBG allocation shall be awarded through grants (based on the distribution formula outlined in Section B) for the purpose of implementing anti-poverty projects to address CSBG legislative goals as set forth in Section 675(C)(1) and Section 672 of the Act. The State will use not less than ninety percent (90%) of the funds allocated under Section 674 of the Act to make grants to eligible entities, as defined in Section 673(1). Funds under this assurance will be allocated as follows:
  - a. Eighty-two and one-half percent (82.5%) of Fiscal Year 2006 funds will be used for funding local initiative projects that are developed by eligible entities to meet Outcome Statement 1 as specified in this plan.
  - b. Seven and one-half percent (7.5%) of Fiscal Year 2006 funds will be allocated to eligible entities to fund the General Emergency Assistance Program (GEAP) as described under Outcome Statement 2 of this plan.

Five percent (5%) of Fiscal Year 2006 grant will be used to fund State Discretionary Programs in accordance with Section 675(C)(b)(1).

The State will not expend more than five percent (5%) of its allotment in compliance with Section 675C(b)(2) for administrative expenses at the State level.

The State will not transfer more than 5% of its allotment under Section 674 to services under the *Older Americans Act of 1965*, the Head Start program, the Energy Crisis Intervention Program, or the *Temporary Emergency Food Assistance Act of 1983*.

Two or more eligible entities may join together to be one project operator as long as they are within the geographic confines of a single Council of Government (COG) area. Appendix M defines the COG areas. If two or more eligible entities within a COG area join together to operate a project to serve the poor population of their respective service areas, the application submission shall be joint. Administration and fiscal procedures will be followed as directed by the OEO. Joint operation could enable smaller eligible entities to implement new and broader-scope activities which will impact upon the poor. It can also stimulate cooperative efforts among eligible entities.

2. **RECAPTURE PROVISION** – The State may recapture and redistribute funds that are unobligated at the end of a fiscal year if such unobligated funds exceed 20% of the amount so distributed for such fiscal year (Sec. 675C(a)(3)(A)). However, P.L. 108-447 mandates, “That to the extent Community Services Block grant funds are distributed as grant funds by a State to an eligible entity, that’s provided under the (CSBG) Act, and have not been

expended by such entity, they shall remain with such entity for carryover into the next fiscal year for expenditure by such entity consistent with program purposes.”

3. **DISTRIBUTION FORMULA** - The funds available for a service area shall be allocated on a ratio determined by calculating the number of poor in the service area in relation to the total poor in the state based on current available statistical data. This distribution shall be used for all State Community Services Program components (i.e., local initiative projects and GEAP).

The 2006 State Discretionary projects will be funded from available amounts for Youth Leadership Programs only based on 5% of Fiscal Year 2006 funds provided to the State. The expectation from the State is that these funds will be leveraged to increase availability of programs and services to eligible youth.

4. **FUNDING CONSTRAINTS** - State CSBG funding will not be known until Congress appropriates funds for Fiscal Year 2006. This will likely occur late in 2005 after the State Plan has been finalized. Accordingly, the State may find that the CSBG grant is insufficient to fund all projects. The State will then develop an alternative approach in order that funded projects will provide a meaningful impact toward achievement of Outcome Statement #1.
5. **FUNDING LIMITATIONS & PROHIBITIONS** – The following constraints are applicable to any state or local organization receiving CSBG funds under the Community Services Block Grant. Additionally, each state grant utilized to award funds to eligible organizations shall, at a minimum, contain these limitations and prohibitions.
  - a. **Construction** - In accordance with *Section 678F(a)(1) of the CSBG Act*, the State or eligible entities will not use any portion of the state CSBG allocation for the purchase or improvement of land or construction, or permanent improvement (other than low-cost residential weatherization or other energy-related home repairs) of any building or other facility. Upon the submission of a waiver request from the state, the Secretary of Health and Human Services may waive the construction limitation if it is determined that extraordinary circumstances exist to justify the purchase of land or the construction of facilities (or the making of permanent improvements) and that permitting the waiver will contribute to the state's ability to carry out the purposes of the Act.
  - b. **Political Activities** – No portion of the State allocation shall be used in connection with political activities as set forth in *Section 678F(b)(1-3) of the CSBG Act* and *United States Code Title 5, Chapter 15, Section 1502(a)(i)(2-3)*. CSBG Grant Funds shall not be used for activities associated with partisan or nonpartisan political activity or any political activity associated with a candidate, or contending faction or group, in an election for public or party office; any activity to provide voters or prospective voters with transportation to the polls or similar assistance in connection with such election, or any other voter registration activity.
  - c. **Nondiscrimination** – In accordance with *Section 678F(c)(1) of the CSBG Act*, the State and Sub-Grantees will practice and enforce that “No person shall, on the basis of race, color, national origin, or sex be excluded from participation in, be denied the benefits of, or be subjected to discrimination under, any program or activity funded in whole or in part with funds made available under this subtitle.”

#### **C. CORRECTIVE ACTION AND SUSPENSION OF FUNDING (HEARINGS & APPEALS PROCEDURE)**

In administering this section, the OEO has adopted most of the *Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments* referred to as the "Common Rule". When a subgrantee defaults or fails to comply with the terms of the award, whether in the State Plan, the Statute, regulations, Grant Agreement or other official OEO Memoranda, the subgrantee may be placed on "high risk" status.

- A. When the OEO determines that the Subgrantee:
  - (1) Has a documented history of unsatisfactory performance;
  - (2) Is not financially stable;
  - (3) Has a management system that does not meet the written management standards set forth by OEO;
  - (4) Has not conformed to terms, conditions, covenants and stipulations of previous grant awards;
  - (5) Is otherwise not responsible, and if the OEO determines that an award will be made, special conditions and/or restrictions shall correspond to the high risk condition and shall be included in the award.
- B. Special conditions and/or restrictions the OEO may impose may include:
  - (1) Payment to the Subgrantee on a reimbursement basis in accordance with Section C of Appeals Procedures;



- (2) Withholding authority to proceed to the next phase until receipt of evidence of acceptable performance within a given funding period;
  - (3) Requiring additional detailed financial reports and/or data;
  - (4) Additional project monitoring and interim audits;
  - (5) Requiring the Subgrantee to obtain technical and/or management assistance;
  - (6) Establishment of additional prior approvals;
  - (7) Establishment of additional constraints as necessary and appropriate in the circumstances; and
  - (8) Require Board acknowledgement of agency's status.
- C. If the OEO decides to impose such special grant conditions, the OEO will notify the Subgrantee as early as possible, of the following:
- (1) The nature of and reason for the special conditions and/or restrictions;
  - (2) The corrective actions which must be completed and approved by OEO prior to the removal of the special conditions and/or restrictions and the time allowed for completing the corrective actions;
  - (3) The method of appeal for reconsideration of the imposed conditions/restrictions; and
  - (4) The training and technical assistance OEO is offering to the Subgrantee, if appropriate, to help correct the deficiency. In addition, OEO will submit a report to the US DHHS Secretary as to the type of assistance offered. If training and technical assistance are not appropriate, OEO will submit a report to the Secretary detailing the reason why.

Any eligible entity which received funding in the previous fiscal year under the Act will not have its present or future funding terminated or reduced below the proportional share of funding it received in the previous year, unless after notice, and opportunity for hearing on the record, the OEO determines that cause existed for such termination or reduction subject to the procedures and review by the Secretary as provided in Section 678C of the Act.

Termination is defined as the permanent withdrawal of funding by the state administering authority of an eligible entity's authority to obligate previously awarded funds before that authority would otherwise expire, or the refusal of the state to continue funding to the eligible entity. A temporary suspension of funding for administrative enforcement purposes shall not constitute a statutory termination or reduction of funding as prescribed by Section 678C of the Act.

If the OEO believes cause for funding termination exists, the following steps shall be followed:

1. If severe management problems exist, a Subgrantee Efficiency Conference shall be held. In attendance will be the Board Chairperson, chief administrative official of the agency, OEO Director, and a Special OEO Comprehensive Assistance Team consisting of one person from the Energy Programs, one person from the Community Services Program, one person from Fiscal Operations, and other persons designated by the Director. The Director will designate a team leader. The Team will perform an on site visit to identify and assist in correcting noted deficiencies through technical assistance and training.
2. A letter from the OEO Director will be sent to the Board Chairperson and chief administrative official of the agency within five (5) working days after the conclusion of the visit summarizing the Team's findings. The agency shall have thirty (30) days from the date of the conference to resolve the deficiencies.
3. If the problems persist and improvement is not noted within the thirty (30) day period, the OEO will conduct another on site visit. A second assessment will be made by OEO staff to include observations and recommendations for performance improvement. Taking into account the seriousness of the visit, within fifteen (15) days of the date of the second visit, the Subgrantee shall develop and implement a quality improvement plan to correct the cited deficiencies. Not later than fifteen (15) days after receiving the proposed plan, the State shall either approve the plan or specify the reason(s) it cannot be approved in writing. If the plan cannot be approved or if, within 30 days acceptance of the plan no improvement is noted, a certified letter will be sent from the OEO Director to the Board Chairperson advising him/her of OEO's recommendation to terminate the grant, along with the reasons for this recommendation. Within twenty-one (21) days of receipt of this recommendation, the affected agency may request a hearing in writing to appeal this recommendation.
4. If the agency appeals OEO's recommendation, the Governor's Chief Legal Counsel will select a Hearings Officer to conduct the hearing within thirty (30) days of receipt of the letter of appeal, utilizing the informal disposition procedures outlined in Section 1-23-320(f) of the State Administrative Procedures Act. All proceedings will be recorded.



5. Should the recommendation for defunding be upheld by the Hearings Officer, the agency may request a review by the US DHHS Secretary in writing to the OEO within fifteen (15) days of the date of the Hearings Officer's determination. The OEO will fax the request for review to the Secretary on the same day it is received.
6. The US DHHS Secretary will either accept or deny this request.
  - a. If the request for review is denied, defunding procedures will begin immediately and will be concluded not more than 3 months following the date of the hearing.
  - b. If the request for review is granted, the Secretary will review the hearing officer's determination not later than ninety (90) days after receiving from the State all necessary documentation relating to the determination.
    - (1) If the Secretary upholds the State's determination, defunding procedures will begin immediately as outlined in 6.a.
    - (2) If the determination is overturned by the Secretary, the grant relationships with the subject agency will be continued.
    - (3) If the review is not completed within ninety (90) days, the determination of the State will become final on the 91<sup>st</sup> day and defunding procedures will begin as outlined in 6.a.
7. In the event funding termination occurs, the Office of the Governor shall extend the geographic service area of an eligible entity when a designated entity can no longer provide CSBG services. This will be done, as necessary, to provide services to the poor in that service area and shall be administered in accordance with existing Federal and State legislation.

#### **D. THE STATE COMMUNITY SERVICES PROGRAM**

##### **1. PROGRAM OVERVIEW**

The Community Services Program shall seek to enable and strengthen the ability of low-income individuals and their families on an equal opportunity basis through activities and helping processes to identify and bolster their capabilities and by providing the necessary supports for them to negotiate service systems and obtain needed resources. Program services shall be designed to create opportunities for low-income families to exercise decision-making power and control over their life affairs and to provide appropriate avenues for these persons to express, as well as enhance, their skills and abilities.

Linkages will be developed with local entities to fill identified gaps in services through the provision of information, referrals, case management and follow-up consultations. Funds made available to eligible entities will be coordinated with other public and private resources and may be used to support innovative community and neighborhood-based initiatives with the goal of strengthening families.

Services shall seek to promote social and economic self-sufficiency through the acquisition and development of knowledge, skills and abilities that will enable low-income individuals to effectively respond to and manage those life circumstances that negatively impact their well-being and accomplishment of life goals. Through the strengthening of individual and family competencies, services shall enable low-income persons to mobilize the resources and support necessary to deal with existing problems, needs and future aspirations.

##### **2. COMMUNITY NEEDS ASSESSMENTS**

The State will secure from each eligible entity in the state, as a condition of funding, a community action plan that includes a **current community-needs assessment** for the community served, to include each county served, which may also be coordinated with community-needs assessments conducted for other programs.

Refer to Appendix B for information describing how the State will carry out this assurance.

##### **3. TRIPARTITE BOARDS**

A tripartite Board of Directors must be constituted in compliance with Section 676B of the Act so as to assure that:

1. **One-third of the members of the Board must be elected public officials, holding office on the date of selection, or their representatives, except that if the number of such elected officials reasonably available and willing to serve on this Board is less than one-third of the membership of the Board, membership on the Board of appointive public officials or their representatives may be counted in meeting such one-third requirement;**

2. Not fewer than one-third of the members are persons chosen in accordance with democratic selection procedures adequate to assure that these members are representative of low-income individuals and families in the area served and such members reside in the neighborhood represented;
3. The remainder of the members are officials or members of business, industry, labor, religious, law enforcement, education or other major groups and interests in the community served, and
4. The Board "...fully participates in the development, planning, implementation, and evaluation of the program to serve low-income communities (Sec. 676B(b))."

Eligible entities will establish procedures under which a low-income individual, community organization, religious organization, or representative of low-income individuals that considers its organization or low-income individuals to be inadequately represented on the Board of the eligible entity to petition for adequate representation.

The state requires that the Board Chairperson of each eligible entity inform the OEO, in writing, of any changes to the Board of Directors, to include new members, rotations and/or resignations, current member data (addresses, telephone numbers, etc.), within thirty (30) days of the change. Community Based Organization Board of Directors Membership Form is included as Appendix J.

**Failure to adhere to federal and state requirements on Board compliance could result in the withholding of CSBG funds.**

In accordance with the CSBG Act, the state will give special consideration in the designation of local community action agencies to any community action agency which received funds under any federal anti-poverty program on the date of enactment of the CSBG Act, except that:

1. Before giving such special consideration, the state shall determine that the agency involved meets program and fiscal requirements established by the state; and
2. If, as a result of any change in assistance furnished to programs for economically disadvantaged persons, the state shall give special consideration in the designation of community action agencies to any successor agency which is operated in substantially the same manner as the predecessor agency which did receive funds in the fiscal year preceding the fiscal year for which the determination was made, including Faith-Based Organizations (FBOs).

For the 2006 Program Year, only those community action agencies funded in FY 2005 under the CSBG Program shall be eligible to apply for the FY 2006 CSBG funds. However, the 5% discretionary funds are not subject to this limitation. Those agencies must satisfy all criteria and requirements established in the State Plan and all other existing rules and statutory guidelines or regulations issued by the OEO. The federal legislation establishing the policy for states to follow in determination of eligible entities will prevail. The state may, based on interpretations of such legislation, alter the designated agencies or designated service areas.

## **E. ELIGIBILITY REQUIREMENTS**

### **1. Income Eligibility**

The Federal Poverty Guidelines **must** be used as the primary criterion in determining income eligibility. In order to receive assistance under any CSBG project involving direct services, an applicant's total household income must not exceed 125% of the poverty level. Household is defined by the Bureau of Census as consisting of all persons who occupy a housing unit (i.e., house or apartment), whether they are related to each other or not. Total household income is based on income at the time of application.

**Total household monthly or annualized income** should be used to determine eligibility. The monthly income should be calculated for the thirty (30) day period preceding and including the date of application. In an effort to assist as many households/individuals as possible, the annual income should be calculated either for the past 12 months, last 30 days, including date of application, times 12 or last 180 days times 2.

The purpose of the income determination is to establish an individual's eligibility for services in accordance with the statutory definition of poverty level. The goal is to implement program services that will enhance and promote self-sufficiency, and not to penalize low-income persons as they move from poverty to self-sufficiency. The OEO shall allow determination of eligibility to be based on total household income according to Federal Poverty Guidelines.

Size of Household	Monthly Poverty Guideline	Annual Poverty Guideline
1	\$ 997	\$11,963
2	\$1,336	\$16,038
3	\$1,676	\$20,113
4	\$2,016	\$24,188
5	\$2,355	\$28,263
6	\$2,695	\$32,338
7	\$ 3,034	\$36,413
8	\$3,374	\$40,488

*For family units with more than 8 members, add \$340 to the monthly amount for each additional member or \$4,075 to the total annual amount. This schedule shall be adjusted based on the Federal Poverty Guidelines currently in effect. This information is based on the 2005 Federal Poverty Guidelines dated 2/18/2005. New guidelines are usually issued in February of each year.*

The Subgrantee shall be responsible for determining the eligibility of each applicant. Self-certification will be permitted, provided there is complete written information in the client file about the applicant household, confirming efforts to obtain documentation from former employers, the client, and other social service agencies. The "Zero Income Certification" (OEO Intake Form) must be signed by those applicants reporting zero income and/or individuals living in the household who are 18 years or older reporting zero income.

Proof of income verification (i.e., a copy of a check or statement confirming the amount of income received for the thirty (30) days preceding and including the date of application) must be included in the client record along with proof of identification (driver's license, social security or pictured ID card).

## **2. Program Eligibility**

After an applicant has been determined to be income eligible, program eligibility must be established in accordance with the State Plan, the Subgrantee's approved CSBG Work Program, and/or federal or state laws, policies and procedures. The "State Community Services Program" section of this plan contains the program eligibility requirements for GEAP.

## **F. PROGRAMMATIC ASSURANCES**

➤ The OEO shall ensure that services and activities are implemented to assist low-income persons, including the poor, in the following areas as set forth in Section 676(b)(1) of the Act:

- *To remove obstacles and solve problems which block the achievement of self-sufficiency;*
- *To secure and retain meaningful employment;*
- *To attain an adequate education;*
- *To make better use of available income;*
- *To obtain and maintain adequate housing and a suitable living environment;*
- *To obtain emergency assistance to meet immediate individual and family needs;*
- *To achieve greater participation in the affairs of the community;*
- *To address the needs of youth in low-income communities; and,*
- *To make more effective use of other programs related to the purposes of the CSBG Act.*

Through the Community Services Program, the OEO shall further ensure that activities are implemented which shall serve to:

- improve the conditions in which low-income people live;
- allow low-income people to own a stake in their community; and
- strengthen agency capacity for planning and coordinating the use of a broad range of Federal, State, local and other assistance, to include private resources.

The State Community Services Program shall be comprised of the following three components:

### **1. Local Initiative Projects**

Eligible Entities shall be required to use no less than 82.5% of their formula allocation for local initiative projects. Local initiative projects shall include those services and activities which address the anti-poverty goals as set forth

in Section 672 of the CSBG Act and may include projects in the areas of employment, education, income management, housing, nutrition, or other areas in which there may be obstacles which impede the attainment of social and economic self-sufficiency by low-income persons. The specific projects for a given service area shall be determined by the local community action agency through a community needs assessment process. Therefore, anti-poverty strategies shall be based on locally defined needs and involve services which are based on a community's own analysis of the poverty related problems.

2. **General Emergency Assistance Program (GEAP)**

The General Emergency Assistance Program is intended to be used for emergency assistance, not for staffing. Therefore, the 7.5% mandatory GEAP allocation, which is calculated using the total State's allocation, must all be designated in the budget in the client assistance line item. The budget for GEAP should reflect zero for staff costs.

Each eligible entity is required to establish a General Emergency Assistance Project (GEAP). The purpose of this project is to assist low-income persons in meeting the emergency needs **(within 72 hours or sooner, whenever possible)** which are confronting them.

Assistance provided under this activity must address the emergency needs of a household to obtain or purchase food, clothing, medical services, payment of rent, mortgage payments **excluding taxes and insurance** (see CSBG Memo 01-04), and repairs to home heating or cooling devices.

The General Emergency Assistance Project must be operated by the Subgrantee and may not be subcontracted. **All emergency client assistance, using CSBG funds, must be budgeted in GEAP.**

**Assistance Level**

The amount of GEAP assistance provided any household cannot exceed **\$1,000** per program year unless authorized by the Executive Director with proper documentation justifying the need being maintained in the client's file. GEAP assistance can be provided to an eligible household only once during the program year. The actual amount of assistance authorized for any household will be determined by the Subgrantee, on a case-by-case basis, and must not exceed the amount necessary to meet the particular emergency need presented by the applicant. Any amount authorized well below the OEO-approved maximum for eligible households must not generate additional obstacles for clients (e.g. having to locate the balance from several additional providers). The agency must be able to provide, in client files, evidence of its efforts to coordinate the additional area services to ameliorate the current emergency need of the client.

An applicant's household may be served during the period January 1, 2006 through December 31, 2006.

In the instance where a client's financial need to pay for the emergency exceeds the GEAP maximum of **\$1,000**, documentation must detail how the outstanding balance is going to be paid. If the client will be receiving funds from another human service provider, this must be documented in the client's file.

The OEO emphasizes that two requirements must be met for GEAP assistance to be rendered: **income and program eligibility.**

**Program Eligibility Criteria for GEAP**

To be eligible for this project, the total household income may not exceed 125% of the poverty level and the circumstances which created the need for emergency assistance must have occurred not more than 30 days before the date of application.

The Subgrantee is responsible for determining the eligibility of each applicant. Self-certification will be permitted, providing the Subgrantee inserts complete written information in the client file about the applicant household, confirming efforts to obtain documentation from former employers, the client, and other social service agencies.

In addition to income eligibility, the client must also be program eligible. Eligibility for assistance under this program requires that a temporary financial emergency has occurred in the client's household. **A client is program eligible if any one of the following is satisfied.**

Types of Temporary Financial Emergencies include, but are not limited to:

a. **Sudden Reduction of Household Income**

The primary wage earner has either been terminated or received a reduction in hours/pay from employment, died or become disabled. *Income eligibility must be met.*

**b. Emergency Assistance for Shelter**

The client dwelling is burned or damaged by an Act of God to the extent it is uninhabitable; or the family faces displacement by eviction notice; or eviction has actually occurred and the family requires immediate temporary shelter overnight until other appropriate housing accommodations can be obtained or arranged. Assistance with temporary shelter requires the coordination of other human service providers to comprehensively address the client's needs. This coordination is to be well documented in each client's file.

**c. Emergency Medical Services**

Clients must have documentation from appropriate medical personnel stating that a health condition requiring immediate attention exists, and if left untreated, will become life-threatening. If a household meets the income test, payment for medical, hospital or physician services is allowed, excluding Medicaid eligible. A client may need medication without which they may be faced with a life-threatening situation. Medicaid recipients must document that they have exhausted their three prescriptions per month limit and do not have the financial ability to purchase needed medications. CSBG funds must supplement but not supplant existing federal and state funds for same. If the medical person so states in writing, assistance can be provided.

**d. Emergency Assistance for Repairs to Home Heating and Cooling Devices**

Clients are eligible if the condition of the household home heating or cooling device is such that immediate minor repairs are required to protect the health and well-being of the household. If a client was income eligible, and repair of the heating or cooling device is necessary to protect the health and well-being of the household, service can be provided.

**e. Emergency Assistance for Utility Payments**

Clients must present a notice of termination from the utility provider which includes the date of termination of services. If the client is income eligible, to protect the well-being of the household, and prevent termination of services, assistance payments can be provided. The Subgrantee must coordinate service delivery with the Low-Income Home Energy Assistance Program when appropriate to fully address the client's energy needs.

**f. Mortgage Payments**

**Mortgage assistance, excluding taxes and insurances, will be allowed at a maximum of \$1,000 as a one time assistance during the program year.** To receive this assistance, clients must provide clear documentation of an emergency and must prove they can sustain once the assistance is provided. The "Mortgage Assistance Affidavit" (Appendix N) must be completed and signed before mortgage assistance is provided. Assistance with mortgage payments requires the coordination of other human service providers to comprehensively address the client's needs. This coordination is to be well documented in each client's file.

**g. Other Conditions not Categorized Above**

Program eligibility not specifically addressed above can also be established by the Subgrantee in the approved work program. Other conditions not categorized above would allow a local agency to define other emergencies that would make a client program eligible. Documentation must be present regarding the rationale for considering the situation an emergency, for example, a lack of clothing in the household or a lack of food.

Program eligibility must be determined in accordance with the State Plan and any other state guidelines pertaining to criteria for eligibility.

**Coordination**

The General Emergency Assistance Program shall be coordinated with other human service agencies and units of local government to strengthen coordinating capabilities, facilitate the exchange of client information, and to better address the total needs of the clients.

Contact with other agencies is necessary to ensure that the client's problems are sufficiently addressed and properly resolved. These contacts must be documented to demonstrate that attempts to avoid duplication of assistance have occurred.

Coordination among agencies will establish a formal mechanism for following-up on clients, and also eliminate the possibility of a client receiving multiple assistance when it is not needed.

Funding

The funds to be used in the GEAP project for FY 2006 are:

- a. Seven and one-half percent (7.5%) of the total CSBG grant distributed by the OEO to eligible entities;
- b. Any funds that would normally be a part of Outcome Statement 1 funding, but due to rejection of projects submitted by eligible agencies, the OEO has directed use in GEAP for FY 2006; and
- c. Any "Outcome Statement 1" funds an eligible entity may choose to use in the project.

The OEO will reject any GEAP project which contains staff costs.

3. **State Discretionary Projects: Youth Leadership Program, Technology Support and State CAP Association**

In accordance with Section 675C(b), the State will use Discretionary funds to make grants to community action agencies for the purpose of supporting locally-operated youth leadership programs.

- **Youth Leadership Program (YLP)**

In FY 2006, in compliance with section 676(b)(1)(B), the State's Youth Leadership Program (YLP) will provide income-eligible middle and high school students educational opportunities targeting individual improvements in academic, behavioral and social achievement, resulting in increased self-sufficiency. Students who complete the program will be able to describe how good character aids in the attainment of their goals, emotional health and healthy relationships. Students will be able to demonstrate critical thinking skills, decision making and problem solving skills.

Youth in low-income families can achieve success; statistically they are at an unquestionable disadvantage. They are most often likely to remain poor, never finish school, and experience negative outcomes. In FY 2006, YLP will provide innovative activities in the areas of personal development and character building, leadership skills, educational achievement, career exploration, and civic responsibility.

YLP best practices include family participation and broad-based community coordination, coordination that includes community action agencies, public schools, representatives of the public and private sector, the faith community, key area leaders and elected officials. Among the best practices identified in the program component are those that include reading enhancement, community volunteer services, financial planning, life skills, parliamentary procedures, employment skills training, and exposure to viable post secondary educational opportunities.

Public school (Local Education Agency or LEA) involvement is a recommended component of the Youth Leadership Program. Files are to contain evidence of this commitment in goods, services, cash or facilities, if applicable.

*Project Start-Up and Compliance*

Projects **must** commence no later than February 1, 2006 (30 days after grant period begins). Subgrantees must notify OEO in writing prior to this date of the status of project start-up. Failure to meet this requirement will result in YLP funds being returned to OEO no later than March 1, 2006 for redistribution to other eligible entities or other YLP expenditures.

Subgrantees must implement viable activities, to include program class sessions, within thirty (30) days of the executed grant agreement. Those activities should be designed to expand existing resources and address needs currently not being met and yield the greatest service benefits relative to the resources invested. Objectives, program evaluation and student assessments are required and must provide for clear documentation of the benefit derived by income-eligible middle and high school students.

In an effort to reduce staffing costs, all YLP staff, excluding full-time agency staff, should be obtained on a contractual basis.

At least 40% of the YLP allocation must be expended by June 30, 2006. Otherwise, the unexpended balance of the 40% must be returned to OEO along with the July 15, 2006 FSR. Subgrantees that fail to create a viable YLP in the 2006 program year will not be eligible for YLP funds in PY 2007.

### *Equipment*

All equipment to be purchased with YLP funds must be required to conduct the project. A written justification must be included for each item (for equipment instructions, refer to OEO Fiscal/Technical Assistance Memorandum F02-01). The applicant organization must not already have the same equipment or a reasonable facsimile available to the project. Justification, along with an explanation for the future use, is required in the grant application if an agency plans to retain the equipment, and OEO approval is mandatory. Vehicle purchases are unallowable.

### *Requirements - Documentation for Program Activities, Student's File, and Audits*

The following is a list for the YLP program that each agency should consult to ensure compliance with State and Federal program guidelines:

- Provide a master list of eligible recipients entering the YLP program, include date enrolled, date graduated or date and reason the student discontinued the program. All youth leadership programs are required to enroll at least 15 participants representing ethnic/racial composition of the low-income communities served.
- Verify a student file is available and fully documented for each eligible student entering the YLP program.
- Document that each eligible student qualifies as an economically disadvantaged recipient by verifying student's household is within the CSBG income guidelines. Document each student's post-assessment with actual outcomes (i.e. personal and academic achievements, improvements in life skills).
- A Pre and Post Assessment must be documented in each student's file.
- Document each student's attendance with attendance logs, including the student's signature, date and time in attendance, with the coordinator's signatures and date.
- Document each scheduled workshop with coordinator's activity report, include in the report, the date, time and place of each workshop, activities performed, and coordinator's signature and date.
- Reconcile the attendance log for snacks or meals provided to students (excess billing of snacks or meals should be reimbursed from agency funds).
- Document field trips with attendance logs, costs, and activity report signed and dated by the coordinator.
- Document luncheon activity and persons in attendance with payment responsibility and funding for all costs associated with the luncheon activities designated to one agency.
- Document supplies or other materials distributed with student's signature, date and purpose of activity.
- Stipends and staff training: OMB Circular A-122, item 34 states, "Participant support costs are direct costs for items such as stipends or subsistence allowances, travel allowances, and registration fees paid to or on behalf of participants or trainees (but not employees) in connection with meetings, conferences, symposia, or training projects. These costs are allowable with the prior approval of the awarding agency."

The OEO agrees to allow stipends that are directly related to the purpose and strategies of the CSBG grant program. Effective immediately, all proposed stipends for CSBG programs must be sent to OEO in writing, clearly justifying the stipends relative to the programs' success (e.g. Employment Skills Training/Internships). OEO will send a written notification of approval for the stipend. Each participant's file must provide adequate documentation to support these expenditures. **Participants must not be paid simply for participating in the program or attending classes.**

OMB Circular A-122 section 53 emphasizes that staff training and education costs are allowable expenditures. To be approved, OEO requires the agency must demonstrate that all staff training and education costs are directly related to the program requirements and are designed to increase the employee's effectiveness within the program.

If these processes are not followed, the expenditures will be unallowable and will be an audit finding.

- Ensure that each household provides a signed disclosure authorization form for all income sources (see Appendix Q).

**Subgrantees must expend all YLP grant funds during the period January 1, 2006 – December 31, 2006. All unexpended Youth Leadership Program funds and State CAP Association funds must be remitted to the OEO at the end of the grant period (by February 14, 2007 along with final FSR).**

Youth Leadership Programs must include coordination and collaboration with organizations in the private and public sectors to achieve the statute's goal of increased community involvement to eliminate the causes/impact of poverty.

The expectation is that these funds will be increased by private sector contributions through Subgrantee program designs. Projects will be funded only for the 2006 program year and shall conclude at the appropriate time based upon the operational timetable established and approved in the work program. An audit will be conducted in accordance with OEO audit policies.

The Youth Leadership Program, must comply with the quarterly and annual reporting requirements of ROMA (Results-Oriented Management and Accountability System) pursuant to Section 678E, using the ROMA Report Form (Appendix P). A description must be provided of specific measures to be used to substantiate the outcomes of each funded program and eligible entity's performance in promoting self-sufficiency, family stability, and community revitalization.

- **Technology Support**

A portion of CSBG funding will be utilized in FY 2006 to facilitate ongoing training, maintenance and language development of the SCROMA (South Carolina Results-Oriented Management and Accountability) client management system. The system utilizes the power of the Internet to facilitate the collection, sharing, analyzing and reporting of client information across multiple users, programs, agencies, and their funding sources – efficiently, securely and in real time.

Funding will also be utilized to explore options to improve efficiency, output, and system expansion to include linkages with other human service agencies in order to maximize the effectiveness of projects in the local service area.

- **SC Association of Community Action Partnerships (SCACAP)**

A portion of CSBG discretionary funding will be awarded to the SCACAP in FY 2006 for the purpose of building the capacity of the state association to assist in addressing the concerns and impact of poverty in South Carolina. The allocation shall be used to offer collaborative trainings, develop a communication plan, enhance public awareness and increase visibility to bring the issues of poverty to the forefront to affect change and develop workable collaborative solutions on the state and community levels.

#### **G. CSBG CLIENT ASSISTANCE PAYMENTS**

Each check and/or voucher must be made payable only to the vendor from whom the applicant proposes to obtain services. Priority for service will be determined by need, based upon the agency's approved work plan, and will be provided only so long as funds exist in an agency's budget for client assistance. Payments made to vendors on behalf of clients using CSBG funds must be made by either a two-party check or OEO-approved two party-voucher system. The two-party voucher system must meet OEO guidelines and be approved by the OEO prior to implementation.

The voucher/check used for the purpose of direct client (monetary) assistance shall be documented as follows:

- CAA's (Subgrantee) name as payer
- Vendor's name as payee
- Eligible applicant's name as recipient

#### **H. COORDINATION**

In FY 2006, the State will require the coordination between programs in each community, where appropriate, with emergency energy crisis intervention programs under Title XXVI of this Act (relating to Low-Income Home Energy Assistance conducted in such community), and Title VI of the Human Services Reauthorization Act of 1984 (PL 98-558).

The coordination of these programs will be carried out at the local level and approved by the OEO. As the State administering agency for the Low-Income Home Energy Assistance and Community Services Block Grant Programs, the OEO shall, through grants with Subgrantees, require a cross-referral of participants in both of the above-mentioned programs to further provide the opportunity for eligible households to participate in these and other agency services for comprehensive case management to enhance client outcomes.

**Subgrantees shall also be required to provide documentation, to include details of what the collaboration will provide, of their coordination with other human service organizations and units of local government in each county of its service area in implementing anti-poverty strategies and preventing the duplication of services. The OEO shall evaluate and ensure coordination with these entities through the project approval process, as well as through on-site monitoring activities, client interviews and file documentation.**



### **III. OEO GRANT MANAGEMENT SYSTEM**

#### **A. FISCAL ACCOUNTABILITY**

In accordance with Section 678D, the State of South Carolina has established fiscal controls and fund accounting procedures to assure the proper disbursement of all federal funds received by the state. Additionally, the state has established procedures for monitoring the utilization of such funds by Subgrantees. The payment schedule for disbursements is outlined in Appendix K.

A description of the controls and procedures to be implemented is as follows:

1. The OEO will follow the State's established fiscal policies and procedures. To accomplish this, the OEO will coordinate these policies with various other branches of state government, including but not limited to: the Budget and Control Board, the Office of the Comptroller General, the General Services Division, the State Treasurer's Office, the State Auditor and other units of the Governor's Office. Financial areas addressed in these procedures consist of fiscal management controls, the accounting system, fund controls, personnel and payroll management, property management, procurement, and the disbursement of funds.
2. The financial standards set forth by the state establish an adequate accounting system with appropriate internal controls which will safeguard assets, check the accuracy and reliability of accounting data, promote operating efficiency and encourage compliance with prescribed management policies.

#### **B. AUDIT REQUIREMENTS**

The OEO will ensure that audits of Subgrantees expending \$500,000 for federally funded programs, activities and services associated with CSBG will be performed in accordance with Section 678D of the Act and the standards of the U.S. Comptroller General as specified in *Standards for Audit of Governmental Organizations, Programs, Activities and Functions*. The audit requirement is met through A-133. OEO will ensure that field audits and the desk audits of independent single audits are conducted in compliance with the above regulations.

Refer to revised Fiscal Memo 08-01, Independent, Single Audit Review and Appeal Procedures for Nonprofit Organizations, contained in Appendix I.

#### **C. MONITORING PROCESS**

To assure the accomplishment of program outcomes and grant compliance, the OEO will monitor each Subgrantee a minimum of 2 times per program year. Monitoring visits will be scheduled with the Subgrantee and conducted by OEO program staff (the CSBG Monitoring Instrument will be forwarded to each agency prior the visit). Monitoring will include a review of client files, year-to-date reporting, year-to-date achievement of outcomes and milestones, collaboration, Board minutes and Board membership rosters. Site visits may also be conducted. If requested materials are not made available to the reviewer(s) upon arrival, the Subgrantee will be responsible for bringing those materials to OEO for a repeat visit (refer to CSBG Program Memorandum C 03-05). The Subgrantee will be briefed on the observations and/or findings generated by the monitoring during the exit interview. Additionally, training and technical assistance may be provided during the monitoring visit or upon request. The OEO may also conduct monitoring through a team visit.

The teams or individuals visiting Subgrantees will prepare a summary of the field visit and Monitoring Report (MR) upon return to the OEO. Subsequently, a letter and a copy of the MR will be forwarded to the Subgrantee within thirty (30) business days, with a copy to the Chairman of the Board of Directors and address any deficiencies identified during the field visit. (Copies of the MR will be forwarded to the entire Board of Directors when there are major issues to be addressed.) Each Subgrantee will have a specific period of time to correct the deficiencies identified, if applicable. Major findings will be tracked by OEO to final resolution. Uncorrected deficiencies may result in contract suspension or possible termination in accordance with established policies, as outlined in Section II. C. of this State Plan.

The OEO shall also conduct follow-up on concerns regarding CSBG funded activities that are received from CSBG service recipients and/or other concerned community members.

#### **D. INVESTIGATIONS**

The State, OEO and Subgrantees will permit and shall cooperate with federal authorities and investigations undertaken in accordance with Section 678D(b)(3) of the CSBG Act.

## **E. SEMI-ANNUAL AND INFORMATION SYSTEMS (IS) REPORTING**

A Semi-Annual Narrative Report must be provided to OEO no later than July 15, 2006, along with the 2<sup>nd</sup> quarter ROMA Report, and focus primarily on the agency outcome statements and performance targets of the current CSBG Work Program. Evaluation is a required component of overall CSBG project management:

**Semi-Annual:** This narrative is to assess and capture the progress of the first six months (year-to-date) of the current year. This report will only require the use of the OEO Milestone Narrative Report for each performance target and activity/milestone – when “actual” compared to “projected” vary by more than 20% (+/-). Once identified, each objective and milestone is to be modified to improve effectiveness and benefits to low-income customers. Current course corrections and/or strategies are to be revised and recorded on the Milestone Narrative Report (Appendix O). Each evaluation should involve all applicable agency management, program and fiscal areas.

**Information Systems (IS):** Eligible entities will comply with accurately completing and timely submission of the CSBG IS Annual Report. The CSBG IS Annual Report is administered by the National Association for State Community Services Programs (NASCSPP) and supported by the U. S. Department of Health & Human Services (DHHS), Office of Community Services (OCS), and is a requirement for all eligible entities in receiving CSBG funding.

CSBG funding allows eligible entities to more fully support their institutional operations for the purpose of enacting initiatives to change conditions that perpetuate poverty, especially unemployment, inadequate housing, poor nutrition, and lack of educational opportunity. In this regard, the annual CSBG IS Report is designed to capture significant data concerning agency coordination and annual achievement, customers, resources, and services. The report encapsulates all community action efforts made possible and broadened as a direct result of CSBG funding and is to be inclusive to all of the agency’s initiatives and programs during the yearlong reporting period.

## **F. POLICY GUIDANCES**

The OEO shall periodically issue instructional memorandums to Subgrantees detailing and/or clarifying policies, procedures and other requirements associated with the operation of the State Community Services Program.

## **G. TRAINING AND TECHNICAL ASSISTANCE**

The OEO shall provide training and technical assistance as needed to Subgrantees on CSBG-related issues.

## **H. TENTATIVE TIMETABLE: SUBMISSIONS FOR FY 2006 CSBG FUNDS (OUTCOME STATEMENTS 1, 2 & 5)**

<b><u>Date:</u></b>	<b><u>OEO Activity:</u></b>
<b>May-July 2005</b>	<i>The OEO prepares the CSBG State Plan.</i>
<b>July 2005</b>	<i>The State CSBG Plan is submitted for the public hearing to the community action agencies.</i>
<b>July - August 2005</b>	<i>Legislative public hearing (federally required) on FY 2006 CSBG State Plan.</i>
<b>August 26, 2005</b>	<i>The OEO submits the final 2006 CSBG State Plan to the Office of Community Services, U.S. Department of Health and Human Services, Washington, D.C.</i>
<b>August 15, 2005</b>	<i>Eligible organizations must submit FY 2006 CSBG Applications, including emergency assistance and youth leadership projects, to the OEO.</i>
<b>December 2, 2005</b>	<i>The OEO will complete review of all CSBG Work Plans and advise all agencies of the outcomes individually by project.</i>
<b>By December 7, 2005</b>	<i>The OEO will issue grant agreements for approved CSBG project activities for the period January 1, 2006 through December 31, 2006.</i>
<b>January 2, 2006</b>	<i>Grants commence if federal funds have been provided. First allocation of funds for individual projects will be released providing all eligibility obligations have been met.</i>

<b>January-December 2006</b>	<i>The OEO monitors Subgrantee compliance with grant agreements and project outcomes; instructions; policies and federal and state legislation. Funds will be released periodically to Subgrantees providing all reporting and grant obligations are current.</i>
<b>February 15, 2006</b>	<i>FY 2005 IS Annual Report and Final ROMA Report (using Appendix P) due to OEO</i>
<b>April or May 2006</b>	<i>Meeting with CAA Director and/or CSBG Directors to review draft of FY 2007 State Plan</i>
<b>July 16, 2006</b>	<i>FY 2006 Semi-Annual Narratives due to OEO using Appendix O (refer to Section III, D for instructions)</i>

*This timetable is subject to revision depending on the availability of federal funds that could alter release of funds. Actions on work plan approval by the state or federal government could affect implementation.*

#### **IV. FY 2006 APPLICATION PROCESS**

##### **A. WORK PLAN/APPLICATION DOCUMENTS AND PROCEDURES**

Subgrantees shall prepare the annual 2006 CSBG Work Plan/Application in the format described using the various OEO application forms. Copies of Letters of Endorsement and Support relative to Subgrantee's proposed activities are to be included.

##### **Standard Detailed Format:**

**Applicants must submit one (1) unbound complete original and three (3) complete copies of the following information in subsequent order and placed in 3-ringed notebooks/binders:**

1. OEO Checklist
2. A Cover Sheet and Executive Director's Introductory Letter
3. OEO Form 507 - Entity Identification indicating all current year funding sources (use only OEO Form 507 last revised 06/04)
4. OEO 509 Narrative – Subgrantee Financial Capability Survey
5. Current Needs Assessment for FY 2005 and copy of assessment instrument
6. OEO 511 Outreach Narrative
7. OEO 512 Narrative – Subgrantee Project Description
8. Budget Forms
9. Budget Narratives
10. Annual Equipment Budget
11. Current IDC Rate
12. Agency Organizational Chart with names and positions noted
13. Current Agency Mission Statement - required if revised within the last year
14. Board Minutes **approving** agency's CSBG **Work Plans and Budgets** (Must be signed by the Board Chairman or Board Secretary)
15. Copies of current Letters of Endorsement and Support (OEO Form 594 is strongly recommended) from private and public resources, including units of local government (must be relative/applicable to project type and must clearly indicate specific roles(s) of collaborating agencies to ensure prevention of the duplication of services)
16. Copy of current Fidelity Bond and copy of the cancelled check
17. Current Board Roster (including updated Community Based Organization Board of Directors Membership Forms – OEO Form 500 dated 6/05)
18. Current Board By-Laws - required if revised within the last year
19. FY 2004 Independent Auditor's Report or letter from auditor stating projected completion date
20. Current Policies and Procedures (notation if on file with OEO indicating date last revised)
21. Current copy of the charter from the Secretary of State if a private non-profit organization or a copy of the legislative act if public (notation if on file with OEO indicating date last revised)
22. Other Required Documents

*Detailed application procedures and copies of application forms are contained in Appendix B.*

## **B. PROJECT REVIEW AND APPROVAL PROCEDURE**

All proposed projects will be reviewed to determine acceptability for funding and feasibility for outcomes and proven history of success in achieving outcomes. Preciseness and clarity of information in the application is essential. Clear measurable results that are identifiable and proven are important to determine project impact. Projects will be reviewed using the following factors: (See Outcome Statement 1)

1. A FY 2005 Needs Assessment summary is present and well documented; evidence of community involvement per ratio of eligible populations.
2. Priority problem areas are clearly identified within the Needs Assessment and are supported by current statistical data (Please be reminded that the Needs Assessment is to be the foundation for the formation of the agency's CSBG program).
3. Problem areas clearly identified and stated, to include:
  - a. Causal nature;
  - b. Targeted population and characteristics of affected persons.
4. Each outcome statement reflects a broad result in the problem that is to be achieved (must be tied to Needs Assessment) and,
  - a. Each outcome statement relates directly to the problem;
  - b. Each outcome statement is realistic and specific enough to be achieved and measured.
5. Performance targets and activities/milestones – 512 Narrative
  - a. Are the project performance targets consistent with the outcome statement?
  - b. Are the project performance targets quantifiable and measurable?
  - c. Are the major activities/milestones clearly stated and do they logically lead to the outcomes?
  - d. Are objectives for major activities identified with completion dates?
  - e. Are the objectives consistent with:
    - (1) Performance necessary to achieve the outcomes?
    - (2) Level of funding requested? (e.g., cost per unit result, per \$1 expended)
  - f. Does each objective take into account start-up time for new projects?
  - g. Has this type of project and/or this applicant agency had a history or pattern of performance problems?
  - h. Are the measures of the objective(s) and outcomes such that data can be readily gathered?
  - i. Are all the projects proposed eligible for CSBG funding?
6. The project clearly indicates the role of the private and public sector entities that are to participate in project operations.
7. The project clearly indicates the role of state and local governmental agencies in the service area that will participate in project operations.
8. Other services, similar to the project design, are identified within the service area so it can be determined if the project is necessary, that is, the only service; or if it is supplemental or unnecessary and duplicative.
9. The expected duration of the benefits or services the project can provide is identified.
10. The ratio of funds to persons assisted can be determined from project materials.

Failure to meet any one of the 10 above-identified rating factors may be cause for project rejection.

**FY 2006 applications must be submitted to arrive at the OEO no later than Monday, August 15, 2005.**

The OEO will complete review of all projects by December 2, 2005. Each agency will be advised in writing of project approval or rejection. The OEO may issue conditional approval status to projects pending resolution of outstanding issues. Applicants will have a complete explanation of deficiencies provided for each rejected project.

Providing funding is available, approved budgets and projects will be authorized to commence January 1, 2006. Such projects will be identified in the grant agreement when it is issued. Projects submitted for first time funding in FY 2006 may be planned for two years of operation. However, since the OEO will provide approval and one year funding for one planning period at a time, objectives and activities in the application documents should be specified for one planning period at a time. If the project submitted for FY 2005 covered a two-year planning period, the OEO will fund a second year of project activity provided all criteria for continuation are met, and that each year shall operate independent of the other and the board minutes are forwarded to OEO in the manner of 2005 year approval.

In the event a project is rejected, the submitting organization shall have thirty (30) days to revise and resubmit. A new project design may be used as a replacement for the rejected projects. The amount of funds contained in resubmitted projects shall not exceed the sum of the rejected amounts. The resubmission must be sent to and be received by the OEO within thirty (30) days of the OEO's rejection notification to the submitting organization unless otherwise authorized by the OEO. Any resubmissions received after this thirty (30) day time period will be rejected and all unobligated service area CSBG funds will be converted to the General Emergency Assistance Project.

The OEO will complete review of resubmitted or redesigned projects not later than thirty (30) days from the date of resubmission. The OEO will act on each project separately. Each agency will be advised in writing of approval or rejection. Agencies will be provided a complete explanation of deficiencies for each rejected project.

Prior to release of CSBG funds, the OEO will prepare a written grant agreement, which will set forth the terms and conditions under which the Subgrantee agrees to operate and expend CSBG funds. **Each Subgrantee approved to receive FY 2006 CSBG funds must have an approved Work Plan and Budget and have an executed Grant Agreement before funds will be released and before any funds may be expended.**

In addition, at all times during and prior to each new funding period, the Subgrantee must be in full compliance with the terms and conditions of the CSBG grant, including all reporting requirements, have approved budgets, and satisfy all policies. If not, funding may be suspended which could lead to termination of the grant.

### **C. POLICY ON REJECTED PROJECTS**

The OEO will act on projects separately. If approved, implementation will commence in accordance with project schedules, but not before January 1, 2006 nor extend beyond December 31, 2006. Implementation may commence on a conditionally approved project while deficiencies are being resolved upon authorization from the OEO. Rejected projects shall have all sums associated with them converted to the General Emergency Assistance Project (GEAP). Agencies shall be instructed in writing to expand the GEAP (Outcome Statement 2) so that it includes the original 7.5% share of the state allocation for the service area plus the sums associated with rejected projects. Expanded GEAP projects incorporating funds associated with rejected general local projects designs (Outcome Statement 1) plus the 7.5% funds allocated for Outcome Statement 2 must be submitted to the OEO not later than November 16, 2005. If not accomplished, the OEO may redistribute the funds for rejected projects to other service areas of the State.

The OEO will act on the revised GEAP project indicating approval or rejection not later than December 2, 2005.

All GEAP sums plus allocations from the 7.5% of the FY 2006 CSBG funds must be used solely for client assistance.

### **D. POLICY ON LATE SUBMISSIONS**

Specific time frames are established to permit appropriate review and action on projects and budgets prior to January 1, 2005. For purposes of validation of submissions, the only acceptable evidence to establish receipt by the due date shall be the date of receipt at the OEO as shown on the time date stamp on the project package. This date must be on or before those dates identified in this Plan. **Documents mailed or delivered and received after any due date will not be considered for funding at any stage of the application process.** The OEO will respond appropriately to each submission. Rejected projects or those submitted after the deadlines shall have CSBG funds associated therewith allocated to the GEAP (Outcome Statement 2). Only applications containing all required documents at the time received by the OEO will be accepted for review. Therefore, the policy of the OEO shall be that local initiative projects submitted after a specified due date will not be reviewed. Instead, these projects shall be considered as rejected for CSBG funds and the entity's allocation will be used for GEAP in the area of service of the eligible entity.

**GLOSSARY OF KEY TERMS**

**Act:** Public Law 97-35, Subtitle B, Title VI of the Omnibus Budget Reconciliation Act of 1981. Related reference: Human Services Reauthorization Act of 1984, Public Law 98-558, Title II. Titles from both Acts are entitled Community Services Block Grant.

**Activities/Milestones:** Interim behaviors that describe customer processes and progress; indicator(s) that will be used to establish or confirm and document achievement of activity/milestone.

**Causes:** The reason(s) or circumstance(s) for a poverty problem.

**Chief Executive Officer of the State:** The Governor of South Carolina.

**COG:** Council of Governments in South Carolina as shown on Appendix M.

**Community Action Agency:** Any organization which was officially designated as a Community Action Agency under the provisions of Section 210 of the Federal ECONOMIC OPPORTUNITY ACT of 1964 for federal fiscal year 1981. Hereinafter referred to as a CAA.

**Community Economic Opportunity Act of 1983:** Act 143 of 1983, South Carolina Code of Laws, which provides for: Implementation of U.S. Public Law 97-35, cited above as the "Act;" designation of an administrative agency; local administrative organizations; eligibility requirements and other matters concerning community action agencies.

**Community Services Program:** All activities funded in South Carolina under the Community Services Block Grant Act.

**Direct Services:** CSBG Direct Services consist of those units of service which can be directly tracked or linked to a specific individual--e.g.: employment counseling.

**Eligible Entities:** Entities eligible to apply for CSBG funds are a CAA or limited purpose agencies designated under the Title II of the Economic Opportunity Act of 1964 for fiscal year 1981 which served the general purposes of a community action agency under Title II of such Act; or, any subgrantee which received assistance under Section 222(a)(4) of the Economic Opportunity Act of 1964 in fiscal year 1981.

Also, in any geographic area of the state not presently served by an existing eligible entity, the Governor may have services provided to such a new area by:

- (A) Requesting an existing eligible entity which is located and provides services in an area contiguous to the new area to serve the new area; or,
- (B) If no existing eligible entity is located and provides services in an area contiguous to the new area, requesting the eligible entity located closest to the area to be served or an existing eligible entity serving an area within reasonable proximity of the new area to provide services in the new area; or,
- (C) Where no existing eligible entity requested to serve the new area decides to do so, designating as an existing eligible entity, any organization which has a Board meeting the requirements of Section 676 or any political subdivision of the state to serve the new area. The designation by the Governor of an organization which has a Board meeting the requirements of Section 676 or a political subdivision of the state to serve the new area shall qualify such organization as an eligible entity.

The state serves all counties of South Carolina with Community Services Block Grant funds. Organizations officially designated as a community action agency under the provisions of the Economic Opportunity Act of 1964 for fiscal year 1981 have been eligible entities. This policy has been in effect since 1982 and may remain in effect for FY 2006.

**Federal Fiscal Year:** October 1 to September 30.

**Indirect Services:** Indirect Services consist of those units of service, which are provided to the community at-large for the purposes of promoting the social and economic self-sufficiency of low-income persons. These types of service units are usually difficult to link to a specific individual--e.g. community meetings or public education efforts.

**Low-Income Population:** Persons or families whose total income is at or below the poverty line established by the Director of the Office of Management and Budget.

**Needs Assessment:** The act of conducting a community survey to gather accurate information about the needs of the poor people living in the community.

**OEO:** The Office of Economic Opportunity of the Office of the Governor.

**Outcome Statement:** An inspiring statement that defines the end-state sought, stated in customer terms.

**Performance Target Outcome:** A ROMA direct measure that defines success for your program in terms of what clients will actually achieve. These are measurable based on outcome statements that allow demonstration of program success.

**Priority:** Action taken by the Board of Directors of a CAA to identify and rate community problems by need and importance. Problems will be identified during the needs assessment conducted by eligible entities.

**Problem:** An obstacle created by a cause(s) or reflecting a condition that prevents individuals or families who are poor from becoming self-sufficient.

**Project:** The program to be funded with CSBG funds during the project period.

**Project Operator:** An eligible entity that will provide local community CSBG programs during FY 2006.

**Project Work Program:** The sum of the application documents for a CSBG project.

**Project Year:** January 1, 2006 - December 31, 2006.

**ROMA:** Results-Oriented Management and Accountability system for measuring performance and results.

**Secretary:** The Secretary of the U.S. Department of Health and Human Services.

**Service Area:** The area of the state in which a project operator will implement Community Services Block Grant activities. The minimum service area shall be a county.

**Social and Economic Self-Sufficiency:** The ability of an individual to meet his or her social and economic needs without assistance from other persons or organizations.

**State:** South Carolina.

**Strategy:** A specific approach to be used to achieve a stated goal and outcome.

**Total Community:** All elements of the community, including private and public organizations, units of local government, and the total general population.

**Unit of Service:** Any specific activity or action engaged in with a low-income person and/or on behalf of such person for the purpose of accomplishing social and economic self-sufficiency goals.

**DETAILED APPLICATION PROCEDURES**

**I PLANNING**

A. Annual Needs Assessment

Prior to applying for CSBG funds, each eligible entity will be required to comply with the assurance outlined in 676(b)(11) to conduct a needs assessment within the service area to identify needs and/or problems. The needs assessment is to consist of three phases: Problem Identification and Statement; Resource Analysis ; and Prioritization according to the following.

Each Eligible Entity's Community Needs Assessment should address the following issues and questions:

1. Describe the method(s) used to gather information on critical community needs.
2. This section should detail the methodology utilized in collecting data for the community needs assessment to include data collection methods and data utilized such as:
  - a. Service history information evidencing and analyzing the demand for services considering not only a comparison of planned versus actual services, but also including an analysis of how funds allotted for the particular service have historically been expended.
  - b. Customer surveys and how completed surveys were obtained (i.e. through mail, door-to-door, gathered at the time agency provided direct service to customer, etc.), as well as the actual tool utilized.
  - c. Participation in focus groups or community forums—Please note that objectivity is key in gaining an accurate view of the true needs within any service areas and these two methods of data collection are less objective than others.
  - d. Participation of agency staff, board members, and executive director.
  - e. Participation and survey of other community groups and organization that serve the same target population.
3. Describe the economic conditions of each county within its service delivery area.
4. This section shall involve research utilizing statistical reports such as the most recent Census data and/or the Census Bureaus more frequent Community Surveys, appropriately documented and identified as sources. The section can also present data available from other sources such as Kids Count and the community needs studies conducted by locally operated organizations such as United Ways, or newspaper, magazine articles, and publicized information relating to employment, education, health and nutrition, transportation or any of the other defined service categories, that evidence needs within a particular geographic area served by an eligible entity.
5. List the critical community needs identified for its service delivery area.
6. In this section, eligible entities should discuss the results of the community needs assessment process being as specific as possible (i.e. a tally for each question of the responses given).

1. Problem Identification and Problem Statement:

The applicant describes existing adverse conditions affecting the low-income population and delineates the differences between what exists (the problem) and what should exist (the goal). There must be a direct relationship between the needs of the poor in the local communities and the goals of the applicant agency in the CSBG Work Plan.

The problem statement must be clear and concise, identifying the problem, the cause(s), the number, characteristics, and the geographic area affected. The problem statement must be clearly drawn from the results documented in the needs assessment data.

Relevant, current data must be obtained from a variety of sources for a needs assessment including:

- surveys
- community meetings
- units of local government
- census information
- agency data
- board and staff perceptions
- reports and studies of other agencies
- other pertinent sources as available



When reviewing data, some of the questions that might be asked include:

- a. What is the quality of the data used in the needs assessment?
  - b. Is it current, objective and comprehensive?
  - c. Are sources documented so that they could be obtained by other researchers and planners?
  - d. Were a number of types of sources used for each problem such as:
    - special statistics
    - other service agency providers
    - low-income groups
    - community studies
  - e. Are the results of prior year evaluations and performance assessments being considered?
2. Resource Analysis: An agency cannot effectively address problems identified unless there has been a thorough analysis of resources that are available. For each problem identified, the agency must identify the public and private resources available to address each problem in the service area. In partnerships, specific roles and responsibilities must be identified. Many anti-poverty resources are administered by other agencies. CSBG and ROMA require that these resources be mobilized in combating poverty problems.

A six-step procedure for analyzing resources is:

1. List problem areas
2. Identify existing state and community agency resources
3. Obtain performance information
4. Review agency referral records
5. Analyze the information
6. Develop agency contacts to establish linkages

Once a potential resource is identified, evaluate its present and potential impact on the problems already identified. Often the resources under consideration include agencies that are service providers to the poor. The following questions may be helpful in reviewing the capability of other service providers:

<b><u>Criterion One:</u></b>	Is service to the poor a major function of the agency under review?
<b><u>Criterion Two:</u></b>	Is the service oriented to the characteristics, requirements and needs of the poor?
<b><u>Criterion Three:</u></b>	Is the service accessible to the poor?
<b><u>Criterion Four:</u></b>	Do specific application eligibility or case management procedures create participation barriers for the poor?

After a careful analysis of all resources is done, the agency should review the following:

- a. Were private and public resources researched and analyzed for the problem area?
  - b. What agencies and institutions are conspicuously absent from consideration?
  - c. What agencies should be addressing specific need areas or target groups, but are not?
  - d. Is performance information about other resource agencies and institutions included?
  - e. Are referral records being used to determine gaps in service within particular need areas?
  - f. Are the most severe poverty problems receiving the largest share of community resources?
  - g. Are resources being allocated reasonably among problem causes?
3. Prioritization: Once major problems existing in the service area are identified, the applicant's Board of Directors has to make a decision on which major problems it will address.

Problems are to be grouped according to approved CSBG program areas such as education, employment, health, nutrition, emergency assistance and housing. The Board must then set funding priorities based on established criteria such as: magnitude of the problem (intensity and severity), capability of the agency to eliminate the negative consequences of the problem, available resources and probable impact.

Some pertinent questions for the Board to examine are as follows:

- Are the problem priorities based on recent data or do they tend to support the agency's current programs?
- Have priorities been assigned to causes within a problem area?

- Do the priorities include needs of the target populations?

B. Needs Assessment Summary and Priorities

At the time of application, each agency will submit a copy of the needs assessment instrument, an Annual Needs Assessment Summary and Problem Priorities. A copy of the minutes of the Board meeting at which the Board set the priorities must be attached to the Needs Assessment Summary. The Summary is to identify the sampling size and demographic base to include approximate age groups.

**II. APPLICATION PREPARATION**

A. Forms

In addition to the Needs Assessment information, the application forms listed in Section IV (A) must be completed and submitted (one original in a 3-ringed binder and three copies) to the OEO.

B. Preparation

Instructions for completing each form and narrative and copies of the forms follow.

# OEO Form 507, Subgrantee Identification Information & Capacity

(This form is intended to capture all agency funds to include State, local, private, Federal, and non-Federal)

APPENDIX C

(revised 6/04)

**Subgrantee Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Governing Body Chairperson's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone & Facsimile Numbers: \_\_\_\_\_

**Executive Director's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone & Facsimile Numbers: \_\_\_\_\_

**Type of Subgrantee** (mark one)

a. ☐ Community Action Agency

b. ☐ City/County Government \_\_\_\_\_

(Specify)

c. ☐ Non-Profit Community Based Organization

d. ☐ Migrant & Seasonal Farm-Worker Organization

**Counties of Agency Service Area:** \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_

## ALL AGENCY PROGRAMS CURRENTLY OPERATED FY 2004

<u>FUNDING SOURCE NAME</u>	<u>PROGRAM/GRANT NAME</u>	<u>\$LOCAL GOV.</u>	<u>\$STATE GOV.</u>	<u>\$FEDERAL GOV.</u>	<u>\$PRIVATE</u>	<u>#PERSONS SERVED</u>
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Use Additional OEO 507 Forms if Necessary

TOTALS

\$

\$

\$

\$

## APPLICATION CERTIFICATION

Total Agency Funds Received FY 2004: \$ \_\_\_\_\_

Total CSBG Funds Requested for FY 2005: \$ \_\_\_\_\_

Total Number of CSBG Projects Proposed for FY 2005: \_\_\_\_\_

**This application has been approved by the applicant's governing body.**

a. Name of Governing Body Chairperson: \_\_\_\_\_

b. Signature: \_\_\_\_\_

c. Date: \_\_\_\_\_

Each agency must provide the 509 Narrative information as outlined below and attach copies of current documents or procedures requested below.

**SECTION I – IDENTIFICATION**

AGENCY: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

NAME, TITLE AND PHONE NUMBER OF FISCAL OFFICER:
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Name \_\_\_\_\_ Title \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

**SECTION II – ACCOUNTING SYSTEM**

1. Does the Subgrantee have an approved Indirect Cost Rate? Yes ☐ No ☐
2. The accounting method for recording and reporting financial information: Cash ☐ Accrual ☐
3. The accounting system is: Manual ☐ Automated ☐
4. Briefly describe the Books of Original Entry used by the Subgrantee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Does the Subgrantee's accounting system provide for accounting and recording expenditures by grants and cost categories?  
Yes ☐ No ☐
6. Does the Subgrantee use an operating budget to control funds by activity? Yes ☐ No ☐
7. Does the Subgrantee prepare an internal monthly financial report? Yes ☐ No ☐
8. Does the Subgrantee have written accounting procedures? Yes ☐ No ☐ (submit copy)
9. List positions authorized to sign checks for the Subgrantee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. To whom does the Fiscal Officer report? \_\_\_\_\_

**SECTION III – GENERAL INFORMATION**

Please discuss financial capacity problems previously noted by the OEO and the corrective actions implemented by the Subgrantee for the new program year: \_\_\_\_\_

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**OEO 511: Outreach Narrative**  
(Use additional sheets as necessary)

1. Provide a copy of the schedule used to serve each county (hours & dates) with the physical location of each center site.
2. If a county does not have a satellite/neighborhood center, how will that county be served?
3. Where will staff perform intakes? When staff is out of the office, who assists clients?
4. How will the agency set days of the month and advertise the scheduled site hours?
5. How will you monitor outreach staff performance? (For example, staff meetings, one-on-one meetings, etc.)
6. What type of training will be provided to outreach workers?
7. Will outreach workers be trained, aware of, and given a copy of the current year Work Plan and CSBG Performance Measures? (Who prepares tally sheets? Monthly summaries?)
8. What will be the procedure used for gathering data needed for the monthly Financial Status Report (FSR)
9. How will you ensure FSR figures submitted by outreach workers are correct?
10. Describe the agency's case management policy & procedures (Provide a copy if available).
11. How will you ensure case management figures are correct, and the case management policy & procedures are followed?

## OEO 512 Narrative: Subgrantee Project Description

The narrative is the basic description of the work to be performed by an applicant with CSBG funds. A separate OEO 512 Narrative is required for each project an applicant proposes to operate with CSBG funds.

### Section I – Identification

AGENCY: \_\_\_\_\_ CURRENT DATE: \_\_\_\_\_

1. Project Name: \_\_\_\_\_ Service Category(ies): \_\_\_\_\_

2. Total Funds for this Project from All Sources: \$ \_\_\_\_\_

### Section II – ROMA Goals, Direct Measures, National Indicators, & Performance Target Outcome(-s) — (See 512 Instructions Part A & B)

3. ROMA Goals (Check all that apply):	Direct Measure(-s)(1a, 3c, 6d, etc.)	National Indicator(s)(1.1,1..2.2.1, etc.)
<input type="checkbox"/> 1. Low-Income people become more self-sufficient.	_____, _____, _____, _____	_____, _____, _____, _____
<input type="checkbox"/> 2. The conditions in which low-income people live are improved.	_____, _____, _____, _____	_____, _____, _____, _____
<input type="checkbox"/> 3. Low-Income persons own a stake in their community.	_____, _____, _____, _____	_____, _____, _____, _____
<input type="checkbox"/> 4. Partnerships among supporters and providers of services to low-income people are achieved.	_____, _____, _____, _____	_____, _____, _____, _____
<input type="checkbox"/> 5. Agencies increase their capacity to achieve results.	_____, _____, _____, _____	_____, _____, _____, _____
<input type="checkbox"/> 6. Low income people, especially vulnerable populations, achieve their potential by strengthening family and support systems.	_____, _____, _____, _____	_____, _____, _____, _____

4. **Project Outcome Statement:**  
*An inspiring statement that defines the end state sought, stated in customer terms.*

5. **Performance Target Outcome:**

*“Of the X, Y will achieve...”*

AGENCY: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

Project Name: \_\_\_\_\_ (cont'd)

**6. Approach:**

(Methodology)

*What agency will do and how agency will do it? What are the core features of the product? Describe your process for ensuring the development and implementation of programs using CSBG funds that actually contribute to upward mobility, development of, new careers, educational attainment, and increased self-sufficiency. List proposed activities in chronological order. State dates with the respective activities from January through December.*

**7. Selection Rationale:**

*Why agency has chosen this approach?*

**8. Partnerships:**

*Define specific roles with other Human Service agencies, government agency, etc..*

AGENCY: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

Project Name: \_\_\_\_\_ (cont'd)

**9. Client Activities/Milestones and Verification:** *Activities/milestones: interim behaviors that describe customer progress; Verification: indicator(s) that will be used to establish or confirm and document achievement of activity/milestone.*

(1) Number and sequentially list the primary activities/milestones (customer behaviors) that will measure customer progress from program entry to measure (performance target) achievement (one activity/milestone per frame). For each milestone, list at least one clear and identifiable means of verification. (2) List the cumulative numbers of customers (i.e., total number since start of program) projected to achieve each activity/milestone by the end of each quarter in the upper, right-hand boxes. (3) Track program progress: Once approved, use this form as a tool to monitor program progress, by listing the **actual total** numbers of customers who achieved each activity/milestone by the end of each quarter in the shaded boxes.

		Indicate Each Quarter:				
Item #	Client Activity/Milestones and Verification	1	2	3	4	Total
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>
	Client Activity/Milestone:					<b>Projected</b>
	Verification:					<b>Actual</b>





The narrative is the basic description of the work to be performed by an applicant with CSBG funds.

**A separate OEO 512 Narrative is required for each project an applicant proposes to operate with CSBG funds.**

OEO 512 serves as:

- The description of the ROMA Goals, Direct Measures, and Indicators to be achieved for each project to be undertaken with CSBG funds, including project outcome statement, measures (performance targets), approach/methodology, selection rationale, client activity/milestones, target numbers and verification.
- The description of how linkages will be developed to fill identified gaps in services, through the provision of information, referrals, case management and follow-up consultations;
- The description of how CSBG funds will be coordinated with other public and private resources;
- The description of how CSBG funds will be used to support innovative community, agency and family-based initiatives related to the purposes of CSBG and ROMA;
- A program monitoring tool for tracking and assessing project performance outcomes.
- A Grant Amendment when new projects are added or significant changes are made in approved projects.

Note:

1. To complete the forms electronically, open the FILL-IN version of the files in MS Word and tab to each shaded field. Form fields will expand to fit text entered up to the maximum number of characters allowed.
2. To complete using a typewriter or to print blank forms, open the PRINT version of the files then print the blank form.
3. At the bottom of each page of Form 512, please uniquely identify the project among the total number of projects proposed for funding in this application. e.g., If the applicant proposes 4 total projects, number each as 1 of 4, 2 of 4, and so on.
4. Attach additional sheets if needed.
5. If possible please include the CSBG/IS Identification Numbers in parenthesis after each service described as provided in.
6. Appendix F-1—USDHHS ROMA Guide Figure 2-D.
7. Appendix F-2--National Indicators of Community Action Performance (the complete "Guide to Organizing and Reporting National Indicators of Community Action Performance" can be found and downloaded from [http://www.nascsp.org/Whats\\_New/whats\\_new.asp](http://www.nascsp.org/Whats_New/whats_new.asp))

### **Section I – Identification**

1. **Project Name:** Enter the title of the project the applicant plans to implement to address the problem/need and the project's associated CSBG approved **Service Category(-ies)**.
  - a. The "Service Category" listed must be identified in the subgrantee's Needs Assessment and enclosed with the grant application. In the Needs Assessment, the poverty-related problem must be stated so as to give the what, why, who, and where. The statement must clearly and concisely identify the real problem, the causes of the problem, the number and characteristics of those affected, and the geographical area affected. A copy of the assessment process and results must be on file at the subgrantee's office for review by the OEO.
  - b. In the Needs Assessment, give current statistical data that supports and documents the causes and severity of the problem/need. The statistical data serves to clarify the scope and magnitude of the problem/need. It must be specific and must relate to the identified problem/need. Give titles and dates of sources used.
2. **Total Funds for this Project from All Sources:** Enter the total amount of funding planned to be received from all funding sources for the implementation of project addressed on the 512.

### **Section II – Goals, Direct Measures, Outcome Statement(-s) & Performance Target Outcome(-s)**

3. **ROMA Goals:** Check the box next to the national ROMA goal(-s) that the project will address with the associated **Direct Measures** and **National Indicators** being recorded alongside. The **Direct Measures** and **National**

**Indicators** can be referenced from the OCS Monitoring & Assessment Task Force National Goals & Outcome Measures (Appendix F-1), and the National Indicator Listing (Appendix F-2).

4. **Project Outcome Statement:** Enter the project outcome statement—an inspiring statement that defines the end state sought, stated in customer terms, for example, “All persons served by the \_\_\_\_ program will get and keep a decent job.” Craft outcome statements consistent with the National ROMA Goals: What is the end state sought for customers, the agency or the community? What is it that we want to inspire ourselves to achieve for all people to be served by the program? *(Formerly referred to as the “project goal.”)*
5. **Performance Target Outcomes:** Enter the performance target outcome for the project. The performance target will define success for the program in terms of what the customer will actually achieve, for example, “Get and keep a job for one year.” The Performance Target Outcome will state the number or percentage of customers entering the program who will achieve the performance target(s). Develop measures (performance targets) that directly contribute to the outcome. Who are your customers? What are their conditions and behaviors? What is the definition of “success” for the project? How many people will you work with this year and how many of them will significantly change their behavior, condition or status? Measures (performance targets) should: indicate the type of change, the degree of change and by when; be measurable, verifiable and doable with a *stretch*; answer the question, “What is success?” and connect to investor outcomes. *(Formerly known as the project “impact outcome.”)*
6. **Approach:** Enter a general description of the approach (methodology, product description) to be used for achieving the performance target outcome. Describe the product and its core features. What “vehicle” will you use to influence customer change? What activities, services, strategies, tactics, actions, etc. will be used? What quality and quantity will be necessary to get a customer to the target? The approach, or product description, must connect in an obvious way to the needs and characteristics of customers.
7. **Selection Rationale:** Describe why the proposed strategies have been selected, and why they are expected to be effective. Discuss “prior results and learning,” or what you will do differently to achieve targeted program outcomes, based on research or prior experience. If other community resources are being applied to the problem, describe how the proposed approach or activities will differ from, reduce barriers to or fill gaps in existing services.
8. **Partnerships:** Lists other entities involved in and supporting the specific project to include a clear definition of the role and responsibility of each partner.
9. **Client Activities/Milestones:** Enter the actions or steps most customers will need to complete to reach the performance target. Client activities (milestones) should be relatively sequential and verifiable (see the paragraph below). All client activities (milestones) should work towards and ultimately result in the performance target identified above. Some examples of relative client activities (milestones) are:
  - (1) engagement
  - (2) taking first steps
  - (3) sustaining intermediate gains
  - (4) getting to the target
  - (5) sustaining gains.

**Verification:** Enter the indicator(s) that will be used to establish or confirm and document that client activities/milestones have been achieved. Verification may be by direct evidence, such as a demonstration of skills or knowledge gained; by third party, such as written employer confirmation of a customer’s job status; and/or by customer reports, such as a customer follow-up questionnaire.

**Projected Quarterly Results:** For each client activity/milestone, project and enter the total number of customers who will have achieved each activity by the end of each quarter. For each quarter, list the total of customers you expect to have reached the specified activity (milestone).

**Actual Quarterly Results:** When the project is approved, use this form to track and monitor program progress. At the end of each quarter, enter the total number of customers who have been verified as actually achieving each of the specified activity/milestones, in accordance with the preceding example.

**OCS' Monitoring and Assessment Task Force  
National Goals and Outcome Measures**

Effective October 1, 1999

For each goal that corresponds to the work your agency does, select at least one measure to report on, based on a current needs assessment survey. If you feel that none of the measures under a particular goal is a good measure of the work actually done by your agency, create a measure that more accurately reflects the work you do. In addition, note that some of the measures could easily apply to other goals as well as the one under which they are listed; use them wherever they seem most appropriate to you.

In measures below, number, wherever it appears, is to be expressed in two parts: the actual count, and the baseline total. For example, when the measure is number of households maintaining employment, express it as a factor of the total number of households served by the agency (e.g., 27 out of 86). Do not indicate percentages (e.g., 31.4% or even 31 out of 100, unless your baseline total is actually 100 households); the data need to be aggregated with that of other agencies before percentages are calculated.

**GOAL 1: (SELF-SUFFICIENCY)**

**LOW-INCOME PEOPLE BECOME MORE SELF-SUFFICIENT**

**Direct measures:**

- a. Number of participants seeking employment who obtain it [as compared with the total number of participants].
- b. Number of participants maintaining employment for a full twelve months.
- c. Number of households in which adult members obtain and maintain employment for at least ninety days.
- d. Number of households with an annual increase in the number of hours of employment.
- e. Number of households gaining health care coverage through employment.
- f. Number of households experiencing an increase in an annual income as a result of earnings.
- g. Number of households experiencing an increase in annual income as a result of receiving allowable tax credits, such as the earned income and childcare tax credits.
- h. Number of custodial households who experience an increase in annual income as a result of regular child support payments.
- i. Number of participating families moving from substandard housing into stable standard housing, as compared with the total number of participating families.
- j. Number of households which obtain and/or maintain home ownership.
- k. Number of minority households which obtain and/or maintain home ownership.
- l. Number of people progressing toward literacy and/or GED.
- m. Number of people making progress toward post-secondary degree or vocational training.
- n. Other outcome measure(s) specific to the work of your agency.

**Survey question measures:**

- o. Number of clients who consider themselves more self-sufficient since participating in services or activities of the agency.
- p. Number of clients reporting an increase in income since participating in the services of the agency.

**Scale measures:**

- q. Number of households which demonstrated movement up one or more steps on a scale or matrix measuring self-sufficiency
- r. Number of households achieving positive movement in self-sufficiency as demonstrated by an increase of at least one point in an overall score of a Family Development Scale.
- s. Number of households achieving stability in the \_\_\_\_\_ dimension of a Family Development Matrix.

**GOAL 2: (COMMUNITY REVITALIZATION)**

**THE CONDITIONS IN WHICH LOW-INCOME PEOPLE LIVE ARE IMPROVED**

**Direct Measures:**

- a. Number of accessible, living wage jobs created and/or retained.
- b. Increase in assessed value of homes as a result of rehabilitation projects.
- c. Increase in proportion of state and federal funds allocated for meeting emergency and long-term needs of the low-income population.
- d. Increase in access to community services and resources by low-income people.
- e. Increase in available housing stock through new construction.

- f. Increase in the availability and affordability of essential services, e.g. transportation, medical care, child care.
- g. Other outcome measure(s) specific to the work done by your agency.

**Survey question measures:**

- h. Number of households who believe the agency has helped improve the conditions in which they live.

**Scale measures:**

- i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
- j. Number of communities achieving stability in the \_\_\_\_\_ dimension of the Community Scaling Tool.

**GOAL 3: (COMMUNITY REVITALIZATION)**

**LOW-INCOME PEOPLE OWN A STAKE IN THEIR COMMUNITY**

**Direct measures:**

- a. Number of households owning or actively participating in the management of their housing.
- b. Amount of "community investment" brought into the community by the Network and targeted to low-income people.
- c. Increase in minority businesses owned.
- d. Increase in access to capital by minorities.
- e. Increased level of participation of low-income people in advocacy and intervention activities regarding funding levels, distribution policies, oversight, and distribution procedures for programs and funding streams targeted for the low-income community.
- f. Other outcome measure(s) specific to the work done by your agency.

**Survey question measures:**

- g. Number of households participating or volunteering in one or more groups.
- h. Number of households who say they feel they are part of the community.

**Scale measures**

- i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
- j. Number of communities achieving stability in the \_\_\_\_\_ dimension of the Community Scaling Tool.

**GOAL 4:**

**PARTNERSHIPS AMONG SUPPORTERS AND PROVIDERS OF SERVICES TO LOW-INCOME PEOPLE ARE ACHIEVED**

**Direct measures:**

- a. Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low-income people.
- b. Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people.
- c. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural, and other special needs considerations are appropriately included in the delivery service system.
- d. Other outcome measure(s) specific to the partnerships created by local agencies.

**Survey question measures:**

- e. Number of principal partners who are satisfied with the partnership.
- f. Partner's rating of the responsiveness of the agency.

**Scale Measures:**

- g. Number of agencies which demonstrated movement up one or more steps on a scale or matrix measuring agency partnership capacity.
- h. Number of agencies achieving stability in the \_\_\_\_\_ dimension of an agency partnership capacity scaling tool.
- i. Number of agencies that achieve and maintain commitments from other service and resource partners to carry out agency mission.
- j. Number of agencies that establish and maintain commitments to provide resources to partner organizations that serve agency customers.
- k. Number of agencies that establish and maintain coordination of agency and non-agency resources to create
- a. a programmatic continuum of services with outcome-based objectives establishes and maintains a selection process which ensures that low-income community members are elected in a public process.

**GOAL 5:**

## **AGENCIES INCREASE THEIR CAPACITY TO ACHIEVE RESULTS**

### **Direct measures:**

- a. Total dollars mobilized by the agency.
- b. Total dollars mobilized by the agency as compared with CSBG dollars.
- c. Number of boards making changes as a result of a periodic organizational assessment.
- d. Number of programs which have become more effective as a result of research and data (their own as well as others).
- e. Number of programs which have become more effective as a result of needs assessment surveys.
- f. Number of families having their situation improved as a result of comprehensive developmental services.
- g. Increase in community revitalization as a result of programs.
- h. Number of agencies increasing their number of funding sources and increasing the total value of resources available for services to low-income people.
- i. Number of agencies leveraging non-CSBG resources with CSBG resources at a ratio greater than 1:1.
- j. Number of agencies where board composition accurately represents the ethnic diversity of the service territory.
- k. Number of agencies where customers served accurately represents the ethnic diversity of the service territory.
- l. Number of agencies where staffing component accurately represents the ethnic diversity of the service territory.
- m. Number of development contacts as a result of outreach programs.
- n. Number of special populations showing improvement as a result of programs aimed at the population.
- o. Number of clients showing improvement as a result of emergency services received.
- p. Other outcome measure(s) specific to the work done by local agencies.

### **Scale measures:**

- q. Number of agencies that achieve and maintain compliance with all applicable Federal, State, and local statutes, regulations, and requirements.
- r. Number of agencies that achieve and maintain a governance process that is inclusive, representative of, and accountable to the community.
- s. Number of agencies that achieve and maintain a workforce environment which empowers and develops its employees, has open communications, pays its employees a living wage, and is mission-driven.
- t. Number of agencies which achieve and maintain a planning, measurement, and evaluation system which creates a programmatic, continuum of services with outcomes-based objectives, and where the measurements of programs are used to improve services.
- u. Number of agencies that achieve and maintain communication and feedback processes that engage all stakeholders.
- v. Number of agencies that establish and maintain a process where evaluations are used to improve services.

## **GOAL 6: (FAMILY STABILITY)**

### **LOW-INCOME PEOPLE, ESPECIALLY VULNERABLE POPULATIONS, ACHIEVE THEIR POTENTIAL BY STRENGTHENING FAMILY AND OTHER SUPPORTIVE SYSTEMS**

#### **Direct measures:**

- a. Number of aged households maintaining an independent living situation.
- b. Number of disabled or medically challenged persons maintaining an independent living situation.
- c. Number of households in crisis whose emergency needs are ameliorated.
- d. Number of participating families moving from homeless or transitional housing into stable standard housing.
- e. Number of households in which there has been an increase in donation of time to volunteer activities (not mandated by welfare-to-work programs).
- f. Number of households in which there has been an increase in children's involvement in extracurricular activities.
- g. Number of high consumption households realizing a reduction in energy burden
- h. Number of households moving from cultural isolation to involvement with their cultural community.
- i. Other outcome measure(s) specific to the work done by your agency.

#### **Survey question measure:**

- j. Number of households indicating improved family functioning since participating in the services or activities of the agency.

#### **Scale measures:**

- k. Number of households moving from crisis to stability on one dimension of a scale.
- l. Number of households moving from vulnerability to stability on one dimension of a scale.
- m. Number of households moving from a condition of crisis to a condition of vulnerability on one dimension of a scale.

## National Indicators Listing

### **Goal 1: Low-Income People Become More Self-Sufficient**

#### ***National Performance Indicator 1.1 – Employment***

The **number and percentage** of low-income participants in community action employment initiatives who get a job or become self-employed as measured by one or more of the following:

- A. Unemployed and obtained a job.
- B. Employed and obtained an increase in employment income.
- C. Achieved “living wage” employment and benefits.

#### ***National Performance Indicator 1.2 – Employment Supports***

The number of low-income participants for whom barriers to initial or continuous employment are reduced or eliminated through assistance from community action as measured by one or more of the following:

- A. Obtained pre-employment skills/competencies required for employment and received training program certificate or diploma.
- B. Completed ABE/GED and received certificate or diploma.
- C. Completed post-secondary education program and obtained certificate or diploma.
- D. Enrolled children in “before” or “after” school programs, in order to acquire or maintain employment.
- E. Obtained care for child or other dependant in order to acquire or maintain employment.
- F. Obtained access to reliable transportation and/or driver’s license in order to acquire or maintain employment.
- G. Obtained health care services for themselves or a family member in support of employment stability.
- H. Obtained safe and affordable housing in support of employment stability.
- I. Obtained food assistance in support of employment stability

#### ***National Performance Indicator 1.3 – Economic Asset Enhancement and Utilization***

The **number and percentage** of low-income households that achieve an increase in financial assets and/or financial skills as a result of community action assistance, and the aggregated amount of those assets and resources for all participants achieving the outcome, as measured by one or more of the following:

- A. Enhancement –
  - 1. Number and percent of participants in tax preparation programs who identify any type of Federal or State tax credit and the aggregated dollar amount of credits
  - 2. Number and percentage obtained court-ordered child support payments and the expected annual aggregated dollar amount of payments.
  - 3. Number and percentage enrolled in telephone lifeline and/or energy discounts with the assistance of the agency and the expected aggregated dollar amount of savings.
- B. Utilization –
  - 4. Number and percent demonstrating ability to complete and maintain a budget for over 90 days.
  - 5. Number and percent opening an Individual Development Account (IDA) or other savings account and increased savings, and the aggregated amount of savings.
  - 6. Of participants in a community action asset development program (IDA and others):
    - a. Number and percent capitalizing a small business due to accumulated savings.
    - b. Number and percent pursuing post-secondary education due to savings.
    - c. Number and percent purchasing a home due to accumulated savings

### **Goal 2: The Conditions in Which Low-Income People Live are Improved**

#### ***National Performance Indicator 2.1 Community Improvement and Revitalization***

Increase in, or preservation of opportunities and community resources or services for low-income people in the community as a result of community action projects/ initiatives or advocacy with other public and private agencies, as measured by one or more of the following:

<b><u>Number of Projects/Initiatives</u></b>	<b><u>Number of Opportunities</u></b>
--	---

- |  |       |       |
|--|-------|-------|
| A. Accessible “living wage” jobs created or retained in the community.   | _____ | _____ |
| B. Safe and affordable housing units created in the community.   | _____ | _____ |
| C. Safe and affordable housing units in the community preserved or improved through construction, weatherization or rehabilitation achieved by community action activity or advocacy   | _____ | _____ |
| D. Accessible and affordable health care services/facilities for low-income people created or maintained.  | _____ | _____ |
| E. Accessible safe and affordable childcare or child development placement opportunities for low-income families created or maintained.  | _____ | _____ |
| F. Accessible “before” school and “after” school program placement opportunities for low-income families created or maintained.  | _____ | _____ |
| Accessible new, preserved, or expanded transportation resources available to low-income people, including public or private transportation.  | _____ | _____ |
| G. Accessible preserved or increased educational and training placement opportunities for low-income people in the community, including vocational, literacy, and life skill training, ABE/GED, and post-secondary education | _____ | _____ |

**National Performance Indicator 2.2 -- Community Quality of Life and Assets**

The quality of life and assets in low-income neighborhoods are improved by community action initiative or advocacy, as measured by one or more of the following:

- A. Increases in community assets as a result of a change in law, regulation or policy, which results in improvements in quality of life and assets;
- B. Increase in the availability or preservation of community facilities;
- C. Increase in the availability or preservation of community services to improve public health and safety;
- D. Increase in the availability or preservation of commercial services within low-income neighborhoods; and
- E. Increase or preservation of neighborhood quality-of-life resources.

**Goal 3: Low-Income People Own a State in Their Community**

**National Performance Indicator 3.1 – Civic Investment**

The number of volunteer hours donated to Community Action.

The current CSBG/IS Survey collects this information and most already report the number of hours volunteered by local residents. Please report the number found in Part I: Section F, Subsection IV (g) of the CSBG/IS Survey [here](#).

**National Performance Indicator 3.2 – Community Empowerment through Maximum Feasible Participation**

The number of low-income people mobilized as a direct result of community action initiative to engage in activities that support and promote their own well-being and that of their community as measured by one or more of the following:

- A. Number of low-income people participating in formal community organizations, government, boards or councils that provide input to decision-making and policy setting through community action efforts.
- B. Number of low-income people acquiring businesses in their community as a result of community action assistance.
- C. Number of low-income people purchasing their own homes in their community as a result of community action assistance.
- D. Number of low-income people engaged in non-governance community activities or groups created or supported by community action.

**Goal 4: Partnerships Among Supporters and Providers of Service to Low-Income People are achieved**

**National Performance Indicator 4.1 – Expanding Opportunities through Community-Wide Partnerships**

The number of organizations, both public and private, community action actively works with to expand resources and opportunities in order to achieve family and community outcomes.

**Goal 5: Agencies Increase Their Capacity to Achieve Results**

**National Performance Indicator 5.1 – Broadening the Resource Base**

The number of dollars mobilized by community action, including amounts and percentages from:

- A. Community Services Block Grant (CSBG)



- B. Non-CSBG Federal Programs
- C. State Programs
- D. Local Public Funding
- E. Private Sources (including foundations and individual contributors, goods and services donated)
- F. Value of volunteer time

**Goal 6: Low-Income People, Especially Vulnerable Populations, Achieve Their Potential by Strengthening Family and Other Supportive Systems**

***National Performance Indicator 6.1 – Independent Living***

The number of vulnerable individuals receiving services from community action that maintain an independent living situation as a result of those services:

- A. Senior Citizens; and
- B. Individuals with Disabilities

***National Performance Indicator 6.2 – Emergency Assistance***

The **number of low-income individuals or families** served by community action that sought emergency assistance **and the percentage** of those households for which assistance was provided, including such services as:

- A. Food
- B. Emergency Payments to Vendors, including Fuel and Energy Bills
- C. Temporary Shelter
- D. Emergency Medical Care
- E. Protection from Violence
- F. Legal Assistance
- G. Transportation
- H. Disaster Relief

***National Performance Indicator 6.3 – Child and Family Development***

The **number and percentage** of all infants, children, youth, parents, and other adults participating in developmental or enrichment programs that achieve program goals, as measured by one or more of the following:

**A. Infants and Children –**

1. Infants and children obtain age appropriate immunizations, medical and dental care.
2. Infant and child health and physical development are improved as a result of adequate nutrition.
3. Children participate in pre-school activities to develop school readiness skills.
4. Children who participate in pre-school activities are developmentally ready to enter Kindergarten or 1st Grade.

**B. Youth –**

1. Youth improve physical health and development.
2. Youth improve social/emotional development.
3. Youth avoid risk-taking behavior for a defined period of time.
4. Youth have reduced involvement with criminal justice system.
5. Youth increase academic, athletic or social skills for school success by participating in before or after school programs.

**C. Parents and Other Adults –**

1. Parents and other adults learn and exhibit improved parenting skills.
2. Parents and other adults learn and exhibit improved family functioning skills.

## **Step 1: Preliminary Agency Checklist – Matching Activities to Performance Indicators**

As indicated, community action agencies and eligible entities are asked to submit ROMA outcome information only for those national performance indicators for which they have supporting programs and activities (CSBG *and* all other funding sources).

In order to help agencies identify national performance indicators relevant to their programs and activities, the following **Preliminary Agency Checklist** cross-references various community action services, activities and funding sources to the 12 national performance indicators.

### **PRELIMINARY AGENCY CHECKLIST**

<b>Community Action Program r Activity</b>	<b>National Performance Indicator</b>	<b>Current ROMA Direct Measure (May be found at <a href="http://www.ROMA1.org">www.ROMA1.org</a>)</b>
Adult Basic Education	1.2	1l
Advocacy	2.1, 2.2	2g, 3e
After school Programs	1.2, 2.1, 6.3	6f
Agency Capacity	5.1, 4.1	5a
Aging Programs	6.1	6a
Asset Formation	1.3, 3.2	1n
Board Membership	3.2	3a
Childcare	1.2, 2.1	1n
Child Development -- Health	6.3	6i
Child Development -- Nutrition	6.3	6i
Child Development -- School Readiness	6.3	6i
Child Support	1.3	1h
Childcare Tax Credit	1.3	1g
Civic Involvement	3.2	3a
Community Enhancement -- Businesses	3.2	3c, 3d
Community Enhancement -- Community Facilities	2.2	2d
Community Enhancement -- Housing	2.1	2e
Community Enhancement -- Jobs	2.1	2a
Community Enhancement -- Safety and Health	2.2	2g
Community Enhancement -- Schools	2.2	2d
Community Enhancement -- Transportation	2.1	2f
Community Investments	3.2	2b
Community Organizing	3.2	3g
Daycare	1.2, 2.1	1n
Disability (Independent Living)	6.1	6b
Disaster Relief	6.2	6c
Earned Income Tax Credit (EITC)	1.3	1g
Domestic Violence Prevention/Intervention	6.2	6i
Economic Development	2.1	2g, 3c, 3d
Emergency Medical Care	6.2	6c
Emergency Services	6.2	6c
Employment	1.1	1a, 1d, 1f
Faith Based Organizations	4.1	4a, 4b, 4c, 4d
Family Development	1.1, 1.2, 1.3, 6.3	6i, 6j
Family Functioning	6.3	6j
Food and Nutrition	1.2, 6.1, 6.2, 6.3	6i
GED	1.2	1l
Head Start	1.1, 1.2, 3.1, 3.2, 6.3	1a, 1l, 1m

Health Care	1.2, 2.1, 6.2, 6.3	<b>1n, 2f, 6c, 6i</b>
Higher Education	1.2, 2.1	<b>1m</b>
Home Budget Management	1.3	<b>6j</b>
Home Ownership	1.2, 3.2	<b>1j, 3a</b>
Homeless Programs	6.2	<b>6d</b>
Housing	1.2, 2.1, 3.2	<b>1i, 1j, 1k</b>
Housing Rehabilitation	2.1	<b>2h</b>
Individual Development Accounts (IDAs)	1.3, 3.2	<b>1n</b>
Income Increase -- Employment	1.1	<b>1f</b>
Income Increase -- Non-Employment	1.3	<b>1g, 1h</b>
Job Placement	1.1	<b>1a</b>
Job Skills Training	1.2	<b>1m</b>
Legal Assistance	6.2	<b>6c, 6i</b>
Leveraging Resources	5.1	<b>5a</b>
Life Skills Training	1.3, 6.3	<b>6j</b>
LIHEAP	6.2	<b>6g</b>
Mental Health	1.2, 2.1, 6.2	<b>1n, 1f, 5o, 6c</b>
Parent Involvement	3.1, 3.2	<b>3e, 3f</b>
Parenting Skills	6.3	<b>6i</b>
Partnerships	4.1	<b>4a, 4b, 4c, 4d</b>
Post-Secondary Education	1.2, 2.1	<b>1m</b>
Public Safety	2.2	<b>2g</b>
Recreational Resources/Facilities	2.2	<b>2g</b>
Section 8 Housing	1.2, 2.1	<b>1i, 1j, 1k, 2g</b>
Self-Employment	1.1, 2.1, 3.1 3.2	<b>3c</b>
Self-Sufficiency	1.1, 1.2, 1.3	<b>5f</b>
Shelter	6.2	<b>6d</b>
Substance Abuse	1.2, 2.1, 6.2	<b>1n, 1f, 5o, 6c</b>
Surplus Food	6.2	<b>6c</b>
TANF	1.1, 1.2, 2.1	<b>1a, 1n</b>
Transitional Housing	1.2, 2.1	<b>1i</b>
Transportation	1.2, 2.1	<b>1n</b>
Vendor Payments	6.2	<b>6c</b>
Volunteers	3.1, 3.2	<b>3g</b>
Women, Infants and Children (WIC)	6.3	<b>6i</b>
Weatherization	1.2, 1.3, 2.1	<b>6g</b>
Workforce Investment Act (WIA)	1.1, 1.2	<b>1a, 1n</b>
Youth Programs	1.2, 2.1, 2.2, 6.3	<b>6f</b>

Each local agency is encouraged to use this Preliminary Agency Checklist as a tool to sort through the 12 national performance measures and identify those that apply to programs and activities, and those that do not.

In addition, the Checklist can serve as a planning guide for transferring current ROMA outcome data to the national performance indicator section of the annual ROMA report. The Checklist shows the location of current ROMA outcome measures within the 12 new national performance indicators.

## 2006 CSBG and LIHEAP Revised Budget Form

### Instructions

#### Note:

- 1- There are 3 Program Activity Budget Forms:  
**Administration**  
**Case Management**  
**Support Services**
- 2- The **Summary** sheet cumulates the information represented on the 3 Activity Budgets.
- 3- Detail worksheets are provided for each Program Activity Budget form for the following budget line items:  
**Salaries**  
**Fringes**  
**Merit/Cola Salary Adjustments**  
**Travel**  
**Support Service/Client Services**

#### Suggestions:

1. Complete the Section I of the Program Activity: **Administration**. This section will automatically copy into all other worksheets.
2. Enter the your agency's **Indirect Cost** figure in Section II of the Program Activity: **Administration**. This section will automatically copy into the other 2 Activity Budget worksheets.
3. Complete the **Salary Detail** worksheets for each Program Activity. The Total **Project Cost** represented on the worksheets will automatically copy into the Activity Budget worksheets. (You will have to develop your on formula to compute **Annual Cost** and distribute to the proper grant component.)  
**Note: Make sure you use the same formula method to calculate on each budget.**
4. Complete the **Fringe Detail** worksheet. Enter base salary for each **Program Activity**. (You may want to create a formula or copy **% of Salary** from one Program Activity section to another.) The Total Fringes will automatically copy into Activity Budget worksheets. **Caution: The order has changed.**
5. If necessary complete the **Merit/Cola Salary Adjustment Detail** worksheet. The **Total Merit/Cola Cost** will automatically copy into the Activity Budget worksheets.
6. Complete the **Travel Narrative** worksheet for each Program Activity. The **Total Travel** will automatically copy into the Program Activity Budget worksheets.
7. Complete the Support Service/Client Services Narrative. In the 2006 CSBG program year services are to be budget by nine (9) of the ROMA service areas not programs:

<b>Emergency Services (GEAP)</b>	<b>Health</b>
<b>Housing</b>	<b>Education</b>
<b>Employment</b>	<b>Nutrition</b>
<b>Self-Sufficiency - Child Care and Transportation</b>	<b>Income Management</b>
<b>Linkages - Partnerships</b>	

**Note:** You may wish to reference a particular program, for example:  
"Barrier Removal" within a service description but the budget is  
to be represented under the ROMA service areas. (may have several)

This section will automatically copy the Program Activity : Support Services worksheet.

**The benefit to this process is to allow the FINAL FSR to be used in reporting  
and comparing services reported on the IS data reported to HHS to meet  
ROMA requirements.**

8. There is NO Worksheet detail for the **OPERATIONAL** or **CONTRACTUAL** budget  
line items on the Program Activity budget forms. A description is required and the  
amount budgeted will be compared to historical expenditures for these line items.  
Remember to follow procurement guidelines. Additional information may be  
requested.
9. An **Annual Equipment Budget Form** will need to be completed for each Program  
Activity budget that has equipment purchases represented. The equipment threshold  
is \$1,500. Remember with purchases over \$1,500 to supply a copy of 3  
competitive bids and Executive Director approval. **All computer/technology purchases  
need to be listed and a copy of specifications included** . (confirm compatibility with ROMA)
- 10 . **Energy Counseling** IDC is Automatically calculated on the Program Activity budget  
for **Administration** .
- 11 . If you are not using a worksheet for example: **Admin MeritCola Det. 1106** move the  
worksheet to the end of the sheet tabs. The tab reference of 1106 represents the forms  
effective date of January 1st, 2006.
- 12 . Most agencies will use the **Program Activity budget form for Administration** to  
budget LIHEAP admin. only.
- 13 . Sheets are **protected** . If you have trouble with the form please call.
- 14 . We encourage you to submit a draft of your budget to Cathy William by email. It would  
also be to your agency's benefit to have a color copier and updated EXCEL software.
- 15 . Use your **SUMMARY** worksheet as a tool as you work the budget to track the balance.  
**Note that the 2006 Budget revised signature requirements. The Summary  
worksheet is the only sheet with signature lines.**
16. For Budget purposes only the new **Board Approval** form must be completed  
and submitted with each budget requiring Board approval. This will take the place of  
minutes.

# OFFICE OF ECONOMIC OPPORTUNITY

CSBG (Discretionary and CFN) and LIHEAP Budget Form (CFDA#'s 93.569, 93.571 & 93.568)

## SECTION I - IDENTIFICATION

Subgrantee Name:			Application:	x	Amendment:	0
Grant:	2006 CSBG and LIHEAP					
Program Activity:	Administration		Grant Period:	January 1, 2006 - December 31, 2006		

## SECTION II - BUDGET SUMMARY

LINE ITEMS	Description of Line Item	CSBG	Discretionary	LIHEAP	TOTAL
Salaries & Wages		0	0	0	0
Fringe Benefits		0	0	0	0
Indirect Costs- <small>includes Energy Counseling</small>	Percentage 0.00%	0	0	0	0
Merit/COLA/FB/IDC Salary Adjustments		0	0	0	0
Travel		0	0	0	0
*Operational Expenditures		0.00	0.00	0.00	0.00
*Equipment		0.00	0.00	0.00	0.00
*Contractual Services		0.00	0.00	0.00	0.00
*Not a calculation must manually load	TOTALS	\$0.00	\$0.00	\$0.00	\$0.00

# OFFICE OF ECONOMIC OPPORTUNITY

CSBG (Discretionary and CFN) and LIHEAP Budget Form (CFDA#'s 93.569, 93.571 & 93.568)

## SECTION I - IDENTIFICATION

Subgrantee Name:			Application:	x	Amendment:	0
Grant:	2006 CSBG and LIHEAP					
Program Activity:	Administration		Grant Period:	January 1, 2006 - December 31, 2006		

## SECTION II - BUDGET SUMMARY

LINE ITEMS	Description of Line Item	CSBG	Discretionary	LIHEAP	TOTAL
Salaries & Wages		0	0	0	0
Fringe Benefits		0	0	0	0
Indirect Costs-includes Energy Counseling	Percentage 0.00%	0	0	0	0
Merit/COLA/FB/IDC Salary Adjustments		0	0	0	0
Travel		0	0	0	0
*Operational Expenditures		0.00	0.00	0.00	0.00
*Equipment		0.00	0.00	0.00	0.00
*Contractual Services		0.00	0.00	0.00	0.00
*Not a calculation must manually load	TOTALS	\$0.00	\$0.00	\$0.00	\$0.00

# OFFICE OF ECONOMIC OPPORTUNITY

CSBG (Discretionary and CFN) and LIHEAP Budget Form (CFDA#'s 93.569, 93.571 & 93.568)

## SECTION I - IDENTIFICATION

Subgrantee Name:			Application:	x	Amendment:	0
Grant:	2006 CSBG and LIHEAP					
Program Activity:	Case Management		Grant Period:	January 1, 2006 - December 31, 2006		

## SECTION II - BUDGET SUMMARY

LINE ITEMS	Description of Line Item	CSBG	Discretionary	Energy Counseling	TOTAL
Salaries & Wages		0	0	0	0
Fringe Benefits		0	0	0	0
Indirect Costs	Percentage 0.00%	0	0		0
Merit/COLA/FB/IDC Salary Adjustments		0	0	0	0
Travel		0	0		0
*Operational Expenditures		0.00	0.00		0.00
*Equipment		0.00	0.00	0.00	0.00
*Contractual Services		0.00	0.00	0.00	0.00
*Not a calculation must manually load	TOTALS	\$0.00	\$0.00	\$0.00	\$0.00



# OFFICE OF ECONOMIC OPPORTUNITY

CSBG (Discretionary and CFN) and LIHEAP Budget Form (CFDA#'s 93.569, 93.571 & 93.568)

## SECTION I - IDENTIFICATION

Subgrantee Name:			Application:	x	Amendment:	0
Grant:	2006 CSBG and LIHEAP					
Program Activity:	Support Services		Grant Period:	January 1, 2006 - December 31, 2006		

## SECTION II - BUDGET SUMMARY

LINE ITEMS	Description of Line Item	CSBG	Discretionary	LIHEAP	TOTAL
Salaries & Wages		0	0		0
Fringe Benefits		0	0		0
Indirect Costs	Percentage 0.00%	0	0		0
Merit/COLA/FB/IDC Salary Adjustments		0	0		0
Travel		0	0		0
*Operational Expenditures		0.00	0.00		0.00
*Equipment		0.00	0.00		0.00
*Contractual Services		0.00	0.00		0.00
<b>Client Services:</b>					
1- GEAP - Emergency Services		0.00	0.00		0.00
2- Housing		0.00	0.00		0.00
3- Employment		0.00	0.00		0.00
4- Self-Sufficiency - Child Care/Transport.		0.00	0.00		0.00
5- Linkages (partnerships)		0.00	0.00		0.00
6- Health		0.00	0.00		0.00
7- Education		0.00	0.00		0.00
8- Nutrition		0.00	0.00		0.00
9- Income Management		0.00	0.00		0.00
CF&N (Nutrition)		0.00			0.00
Energy Assistance				0.00	0.00
*Not a calculation must manually load	TOTALS	\$0.00	\$0.00	\$0.00	\$0.00

# OFFICE OF ECONOMIC OPPORTUNITY

## Budget Summary

CSBG (Discretionary and CFN) and LIHEAP Budget Form (CFDA#'s 93.569, 93.571 & 93.568)

### SECTION I - IDENTIFICATION

Subgrantee Name:		Application:	x	Amendment:	0
Grant:	2006 CSBG and LIHEAP				
Program Activity:	SUMMARY	Grant Period:	January 1, 2006 - December 31, 2006		

### SECTION II - BUDGET SUMMARY

LINE ITEMS	CSBG	Discretionary	LIHEAP	TOTAL
Salaries & Wages	0	0	0	0
Fringe Benefits	0	0	0	0
Indirect Costs	0	0	0	0
Merit/COLA/FB/IDC Salary Adjustments	0	0	0	0
Travel	0	0	0	0
Operational Expenditures	0.00	0.00	0.00	0.00
Equipment	0.00	0.00	0.00	0.00
Contractual Services	0.00	0.00	0.00	0.00
Client Services:				
CSBG	0.00	0.00		0.00
CF&N (Nutrition)	0.00			0.00
LIHEAP - Energy Assistance			0.00	0.00
	\$0.00	\$0.00	\$0.00	\$0.00

### SECTION III - APPROVALS

EXECUTIVE DIRECTOR SIGNATURE		Date			
BOARD CHAIRPERSON SIGNATURE			OEO Approval		Date
(required on Application & 1st Amendment budgets)		Date			







Subgrantee Name:					Grant:	2006 CSBG and LIHEAP	Application:	x	Amendment:	0
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<b>FRINGE DETAIL</b> <b>Program Activity: Administration</b>
---

CSBG					Discretionary					LIHEAP				
Benefits	Base		% of Salary	Project Cost	Benefits	Base		% of Salary	Project Cost	Benefits	Base		% of Salary	Project Cost
FICA		X		0	FICA		X		0	FICA		X		0
Worker's Comp.	0	X		0	Worker's Comp.	0	X		0	Worker's Comp.	0	X		0
Health Insurance		X		0	Health Insurance		X		0	Health Insurance		X		0
Retirement	0	X		0	Retirement	0	X		0	Retirement	0	X		0
Unemployment		X		0	Unemployment		X		0	Unemployment		X		0
			<b>TOTAL</b>	<b>\$0</b>				<b>TOTAL</b>	<b>\$0</b>				<b>TOTAL</b>	<b>\$0</b>

<b>FRINGE DETAIL</b> <b>Program Activity: Case Management</b>
--

CSBG					Discretionary					LIHEAP - Energy Counseling				
Benefits	Base		% of Salary	Project Cost	Benefits	Base		% of Salary	Project Cost	Benefits	Base		% of Salary	Project Cost
FICA		X		0	FICA		X		0	FICA		X		0
Worker's Comp.	0	X		0	Worker's Comp.	0	X		0	Worker's Comp.	0	X		0
Health Insurance		X		0	Health Insurance		X		0	Health Insurance		X		0
Retirement	0	X		0	Retirement	0	X		0	Retirement	0	X		0
Unemployment		X		0	Unemployment		X		0	Unemployment		X		0
			<b>TOTAL</b>	<b>\$0</b>				<b>TOTAL</b>	<b>\$0</b>				<b>TOTAL</b>	<b>\$0</b>

<b>FRINGE DETAIL</b> <b>Program Activity: Support Services</b>
---

CSBG					Discretionary									
Benefits	Base		% of Salary	Project Cost	Benefits	Base		% of Salary	Project Cost					
FICA		X		0	FICA		X		0					
Worker's Comp.	0	X		0	Worker's Comp.	0	X		0					
Health Insurance		X		0	Health Insurance		X		0					
Retirement	0	X		0	Retirement	0	X		0					
Unemployment		X		0	Unemployment		X		0					
			<b>TOTAL</b>	<b>\$0</b>				<b>TOTAL</b>	<b>\$0</b>					







[illegible]

Subgrantee :

Application:           X          

Grant:

          2006 CSBG and LIHEAP          

Amendment:

          0          **Administrative Travel Narrative**

Type	Description	CSBG	Discretionary	LIHEAP
Local				
		\$0	\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0			
		\$0	\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0			
		\$0	\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0			
		\$0	\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0			
		\$0	\$0	\$0
Total Travel		\$0	\$0	\$0

Subgrantee : \_\_\_\_\_ Grant: 2006 CSBG and LIHEAP  
 Application: x Amendment: 0

### Case Management Travel Narrative

Type	Description	CSBG	Discretionary
Local			
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Total Travel		\$0	\$0

Subgrantee : \_\_\_\_\_ Grant: 2006 CSBG and LIHEAP  
 Application: x Amendment: 0

### Support Service Travel Narrative

Type	Description	CSBG	Discretionary
Local			
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Non - Local	Destination: Meeting: # of Staff: Description: Number of Days: Lodging Cost: \$0 Transportation: \$0 Other Cost: \$0		
		\$0	\$0
Total Travel		\$0	\$0

Subgrantee :

Page 1

Grant:

2006 CSBG and LIHEAP

Application:

x

Amendment:

0

**SUPPORT SERVICE/CLIENT SERVICES NARRATIVE**

Client Service	Description	Amount
1. GEAP- Emergency Services	Total	\$0.00
1.a. Discretionary: GEAP		\$0.00
2. Housing	Total	\$0.00
2.a. Discretionary: Housing		\$0.00
3. Employment	Total	\$0.00
3.a. Discretionary: Employment		\$0.00
4. Self-Sufficiency - Child Care and Transportation	Total	\$0.00
4.a. Discretionary: Self-Sufficiency		\$0.00
5. Linkages - Partnerships	Total	\$0.00

Agency :

Page 2

Grant:

2006 CSBG and LIHEAP

Application:

x

Amendment:

0

## SUPPORT SERVICE/CLIENT SERVICES NARRATIVE

Client Service		Description	Amount
5.a.	Discretionary: Linkages -		\$0.00
		Total	\$0.00
6.	Health		\$0.00
		Total	\$0.00
6.a.	Discretionary: Health		\$0.00
		Total	\$0.00
7.	Education		\$0.00
		Total	\$0.00
7.a.	Discretionary: Education		\$0.00
		Total	\$0.00
8.	Nutrition		\$0.00
		Total	\$0.00
8.a.	Discretionary: Nutrition		\$0.00
		Total	\$0.00
9.	Income Management		\$0.00
		Total	\$0.00
9.a.	Discretionary: Income Mang.		\$0.00
		Total	\$0.00

Agency :

Grant:

Application:

2006 CSBG and LIHEAP

x

Amendment:

0

SUPPORT SERVICE/CLIENT SERVICES NARRATIVE		
Client Service	Description	Amount
CF&N	Total	\$0.00
		\$0.00
Energy Assistance	Total	\$0.00
Total Client Services		\$0.00
CSBG Client Services		\$0.00
Discretionary Client Services		\$0.00

**Office of Economic Opportunity**

**Annual Equipment Budget**

**Office of Economic Opportunity**

**Annual Equipment Budget**

2006 CSBG and LIHEAP

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January 1, 2006 - December 31, 2006

[illegible]

**Signature of Executive Director** \_\_\_\_\_ **Date** \_\_\_\_\_



**Office of Economic Opportunity (OEO)  
Community Action Agency  
Board Approval**

Grants administered by the State of South Carolina's Governor's Office of Economic Opportunity(OEO) require Community Action Agencies, as eligible entities, comply with Section 676B of the CSBG Act assuring an appropriately constituted and well-functioning tripartite board. Effective tripartite boards reflect and promote the unique anti-poverty leadership, action, and mobilization responsibilities assigned by law to Community Action Agencies. Boards are responsible for assuring that agencies continue to assess and respond to the causes and conditions of poverty in their community, achieve anticipated family and community outcomes, and remain administratively and fiscally sound. The Community Services Block Grant Reauthorization Act of 1998 requires entities administer their CSBG program through tripartite boards that "fully participate in the development, planning, implementation, and evaluation of the program to serve low-income communities."

CFDA #	OEO PROGRAM	ALLOCATION
93.569	Community Services Block Grant (CSBG)	
93.571	Community Food and Nutrition (CF&N)	
93.568	Low Income Home Energy Assistance Program (LIHEAP)	
81.042	Weatherization Assistance Program (WAP)	

Each board member's signature acknowledges their review of the budget and/or work plan being presented and approves program components of each grant, including salary increases and/or new positions (employees) as represented on the budget and procurement /equipment items represented on the budget that require board approval as follows:

### Salary & Wage Increases (New Positions/Employees):

## Procurement:

**Community Action Agency:**

Date of Review and Approval by Board:

**Executive Director's Signature:**

**Board Chairperson's Signature:**

[illegible]

**Community Services Block Grant**

**Prior Year Report on PY 2005 Accomplishments**

**BACKGROUND**

The South Carolina Office of the Governor, Office of Economic Opportunity (OEO), is the State's administering agency for the Community Services Block Grant (CSBG). The Office contracts with 15 community action agencies (CAAs) which assist low-income people who have poverty related problems.

South Carolina granted 95 percent of the CSBG allocation for the Fiscal Year 2005 to community action agencies based on the percentage of poor people who live in a CAA area.

The State awarded Youth Leadership grants to community action agencies, in an effort to further facilitate the State's goal of creating innovative approaches to address the issues of poverty.

The OEO requires each CAA to send data to the OEO on program accomplishments. Program Coordinators from the OEO monitor the agencies during the grant cycle at least twice.

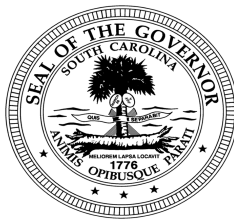
Information from these sources comprises this report. The data has been applied to the General Areas of Need Identified in the 2005 State Plan and are valid through December 31, 2005.

The 15 CAAs coordinate projects with other social service agencies in their respective areas. These other agencies consist of the South Carolina Employment Security Commission, Job Service, the SC Department of Social Services, the SC Department of Health and Environmental Control. They also coordinate with units of local government, local churches, civic groups, businesses, and special interest groups.

In 2005, the CAAs received the aggregate sum of \$10,151,486 for the provision of project activities to serve approximately 180,000 eligible clients. Of that, \$871,980 represents 2004 CSBG unexpended funds and \$72,074 was allocated for Community Food & Nutrition (CF&N) assistance and included 2004 CF&N carryover funds.

**SUMMARY**

The South Carolina Office of the Governor, Office of Economic Opportunity adheres to the Federal requirements for administration of the Community Services Block Grant. The OEO has administered anti poverty programs through CAAs in South Carolina since the mid-sixties and is experienced in these kinds of programs. Through the efforts of the 15 CAAs, the poor in every county in South Carolina are being served with CSBG projects. The results contained in the prior year report clearly demonstrate compliance with the assurance, the State Plan and the Federal requirements associated with the legislation.



**State of South Carolina**  
**Office of the Governor**

MARK SANFORD  
GOVERNOR

OFFICE OF EXECUTIVE  
POLICY AND PROGRAMS

**APPENDIX I**

**FISCAL/ TECHNICAL**

**ASSISTANCE MEMORANDUM F 08- 01 (Revised)**

**TO:** See Distribution  
**FROM:** Rosalie Smith  
Senior Manager for Audits  
**DATE:** June 29, 2005  
**RE:** Independent, Single Audit Review and Appeals Procedures for Nonprofit Organizations

**This memorandum supersedes previously issued OEO Technical Assistance Memo F 08-01 (Revised), dated August 1, 2002.**

**PURPOSE**

The purpose of this memorandum is to set forth standards for obtaining consistency and uniformity among nonprofit organizations, local governments and other entities expending federal awards. The following regulations are federal audit requirements for grant agreements with the Office of Economic Opportunity:

1. Human Services Reauthorization Act of 1984, Public Law 98-558.
2. OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations (Issued pursuant to the Single Audit Act of 1984, Public Law 98-502 and the Single Audit Act Amendments of 1996, Public Law 104-156).
3. OMB Circular A-110, Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations.
4. OMB Circular A-129, Policy for Federal Credit Programs and Non-Tax Receivables, Part V Delinquent Debt Collection.
5. Uniform Requirements for Grants and Cooperative Agreements with State and Local Governments (Common Rule).
6. OMB Circular A-122, Cost Principles for Non-Profit Organizations.

## **SINGLE AUDIT**

### **1. Definition**

An audit which includes the subgrantee's financial statements and the federal awards as described in OMB Circular A-133, Subsection .500.

### **2. Audit Requirements**

Subgrantees that expend \$500,000 or more in a fiscal year in federal awards shall have a single audit conducted for that year in accordance with the provisions of this part.

Audits must be conducted in compliance with federal and state laws and Government Auditing Standards established by the Comptroller General of the United States and Generally Accepted Auditing Standards established by the American Institute of Certified Public Accountants (AICPA).

### **3. Sanctions**

When a subgrantee demonstrates a continued inability or unwillingness to have an audit conducted in accordance with these standards, OEO will institute appropriate sanctions which could include, but are not limited to, withholding future federal awards, disallowing overhead costs, suspending federal awards until the audit is completed and submitted or terminating federal awards.

### **4. Audit Costs**

Professional fees associated with audits are allowable charges if made in compliance with OMB Circular A-133 and may be allocated as indirect cost. Generally, the percentage of costs charged shall not exceed the percentage derived by dividing OEO program funds by total federal funds expended by the subgrantee during the agency's fiscal year under audit.

## **SELECTION OF AUDITORS**

When procuring audit services, the subgrantee shall use the guidelines provided in OEO Technical Assistance Memorandum F 02-01 (Procurement Procedures). Each Request for Proposal for audit services shall be for a period not to exceed three (3) consecutive fiscal years. At a minimum, procurement of audit services shall include advertisement of the Request for Proposal in the South Carolina Business Opportunities newsletter, published by the State Budget and Control Board, and the newsletter of the South Carolina Association of Certified Public Accountants.

When requesting proposals for audit services, the objective and scope of the audit should be made clear. Factors to consider in evaluating each proposal include responsiveness to the proposal, relevant experience, staff professional qualifications, technical abilities, and price. Whenever possible, the subgrantee is encouraged to make positive efforts to utilize small businesses, minority-owned firms, and women's business enterprises (OMB Circular A-133).

In compliance with the Sarbanes-Oxley Act of 2002 Sec. 203, an incumbent auditor can submit bids for consecutive subsequent periods; however, the lead auditor or audit partner responsible for reviewing the audit may provide such services for no more than five (5) consecutive fiscal years. After such time, a new lead auditor or audit partner shall be appointed.

### **INDEPENDENT AUDIT REPORT SUBMISSION**

The independent audit shall be completed and the required report submitted to OEO within nine (9) months of the close of the agency's fiscal year-end. The report shall include an opinion (or disclaimer of opinion) as to whether the subgrantee complied with the laws, regulations and provisions of the grant agreements, Schedules of Budget and Incurred Costs, and the Schedule of Findings and Questioned Costs.

Within thirty (30) days following receipt of the independent audit report, the subgrantee must provide OEO:

1. Two (2) copies of the Independent Audit Report
2. **A completed/signed copy of the OEO Audit Report Review (attached) and required supporting documents**
3. A copy of tax Form 990
4. An explanation of adjustments to the amounts reported on the final FSR
5. Information that may be pertinent to the grant

The subgrantee will forward at least one (1) copy of the independent audit report to each funding source represented in the report, exclusive of OEO's required copies.

### **OEO AUDIT RESPONSIBILITIES**

1. Audit subgrantee activities to ensure that federal awards are used for authorized purposes and in compliance with the laws and regulations governing the provisions of each grant agreement;
2. Ensure that the subgrantee has satisfactorily met the fiscal year-end audit requirements;
3. Ensure the subgrantee takes appropriate and timely corrective action;
4. Follow-up on prior year's audit findings; and
5. Issue the Desk Audit Report.

## **OEO DESK AUDIT**

A desk audit is performed annually to ascertain each agency's grant agreement compliance and to examine questioned costs and findings as reported in the independent audit report. At the same time, the desk audit is used to determine any fund balances due OEO and grant agreement violations not reported in the independent audit report.

OEO will use the Desk Audit Guide to determine audit acceptability. For each program, OEO's Desk Audit Report will describe:

- A. Audit findings or questioned costs
- B. Justification for each such finding or question
- C. Disposition of each questioned cost - allowed or disallowed
- D. A decision on disallowed costs
- E. Amount of funds involved, if any, and total sum in question

*The desk audit will be conducted within six (6) months following receipt of the subgrantee's independent audit report. Once the desk audit is complete, OEO will address the initial Desk Audit Report to the subgrantee's Board Chairperson. A copy of the report will be sent to the agency's Executive Director and appropriate OEO staff (Executive Director, Program and Fiscal Managers).*

The subgrantee shall respond to the initial report in writing to the OEO Senior Auditor within thirty (30) business days of the date of the report. Failure to respond to the initial report within the required time shall signify the agency's acceptance of the report's findings.

Any follow-up correspondence regarding the initial report will be sent to the subgrantee's Executive Director unless otherwise requested by the subgrantee's Board of Directors. When the subgrantee fails to respond to follow-up correspondence within the requested time frame, correspondence will be sent to the Board Chairperson. The agency's failure to respond may result in a suspension of future funding.

## **DISALLOWED COSTS**

The OEO desk audit report shall identify questioned costs (i.e. over-expended line items) that OEO has classified as disallowed. The disallowed costs shall be payable to the OEO within forty-five (45) days from the date of the initial desk audit report. Payment methods permitted to satisfy disallowed costs are as follows:

### ***1. Lump-sum Payment***

The OEO must receive the total disallowed sum within the aforementioned time period. If the subgrantee is financially unable to make full payment within this time frame, this fact must be stated to the OEO Senior Auditor in writing within twenty (20) business

days of the date of the initial desk audit report. The subgrantee will be subject to an OEO field audit to document the non-federal/non-state funds available for repayment of delinquent debt.

## **2. *Installment Payments***

Subsequent to verification of the subgrantee's inability to repay in lump-sum, OEO will establish an agreement with the subgrantee for installment payments. Those terms will be provided in writing. The standard repayment period is twelve months, not to exceed a thirty-six month maximum time allowance. Monthly payments will be due OEO by the 15<sup>th</sup> of each month. Quarterly payments will be due OEO by the 15<sup>th</sup> day of the last month in the quarter.

## **3. *Delinquent Payments***

If a subgrantee fails to repay funds within the required time frame, the regulations mandated by OMB Circular A-129, Policies for Federal Credit Programs and Non-Tax Receivables, Part V-Delinquent Debt Collection and 4 CFR Chapter 11-Federal Claims Collection Standards (General Accounting Office – Department of Justice) may be exercised in the collection of delinquent debt.

## **SUMMARY**

The purpose in establishing these procedures is to permit a thorough and fair review of audit questions and disallowances. The OEO shall revise these procedures as needed in order to maintain compliance with state and federal requirements.

If you have any questions, you may contact me at (803) 734-0672.

ATTACHMENT: Audit Report Review

## **DISTRIBUTION:**

CAA Board Chairpersons

CAA Executive Directors

CAA Fiscal Officers

OEO Director, Ashlie Lancaster

OEO Staff

**STATE OF SOUTH CAROLINA  
OFFICE OF THE GOVERNOR  
OFFICE OF ECONOMIC OPPORTUNITY**

**AUDIT REPORT REVIEW**

(To be completed by the agency, signed and submitted to the OEO along with two copies of the agency's Independent Single Audit Report)

Auditee: \_\_\_\_\_

Community Action Agency

Audit Period: \_\_\_\_\_

<u><b>General</b></u>	<u>Yes</u>	<u>No</u>	<u>Init</u>
1. Is the auditor independent?	_____	_____	_____
2. Do the audit reports contain the required Schedules of Budget and Incurred Costs for all OEO administered programs?	_____	_____	_____
3. Do the audit reports state the period examined?	_____	_____	_____
4. Do the audit reports state the degree of responsibility taken by the agency and by the auditor for the financial statements?	_____	_____	_____
5. Do the audit reports indicate the audit was conducted in accordance with the following: _____	_____	_____	_____
A. Auditing standards generally accepted in the United States of America?	_____	_____	_____
B. OMB Circular A-133? _____	_____	_____	_____
C. Government Auditing Standards?	_____	_____	_____
6. Do the audit reports contain an opinion on the agency's compliance with respect to the agency's major federal programs?	_____	_____	_____
7. Do the audit reports identify instances of noncompliance and the federal program?	_____	_____	_____
8. Do the audit reports identify reportable condition(s) and the federal program?	_____	_____	_____
	<u>Yes</u>	<u>No</u>	<u>Init</u>



- |  |       |       |       |
|--|-------|-------|-------|
| 9. Do the audit reports identify reportable conditions considered to be material weaknesses and the federal program?                     | _____ | _____ | _____ |
| 10. Based on the reviewer's knowledge and review of the report, does it appear that there are any unreported instances of noncompliance? | _____ | _____ | _____ |
| A. If so, include a statement that identifies the instance(s).   | _____ | _____ | _____ |
| 11. Are the audit reports signed by a CPA or CPA firm and dated?   | _____ | _____ | _____ |

**Schedule of Findings & Questioned Costs**

- |   |       |            |                       |
|---|-------|------------|-----------------------|
| 1. Did the auditor issue a management letter?   | _____ | _____      | _____                 |
| A. A copy of the management letter is included with this report.  | _____ | _____      | _____                 |
| B. A copy of management's response indicating the actions taken to remedy the situation is included with this report. | _____ | _____      | _____                 |
| 2. Are prior year findings presented in the current year's report?  | _____ | _____      | _____                 |
| 3. Do current year findings provide appropriate oversight officials sufficient details?                               | _____ | _____      | _____                 |
| A. Are the federal program(s) involved identified?  | _____ | _____      | _____                 |
| B. Is the incident described in sufficient detail?  | _____ | _____      | _____                 |
| C. If appropriate, is the amount identified (quantified)?   | _____ | _____      | _____                 |
| D. Does the report identify the section of the law, regulation, contract or grant that was violated?                  | _____ | _____      | _____                 |
| E. Are recommendation(s) for corrective actions offered?  | _____ | _____      | _____                 |
| F. Does the current year Schedule of Findings and Questioned Costs address prior year's unresolved findings?          | _____ | _____      | _____                 |
| 4. Does the Schedule of Findings & Questioned Cost identify:  |       |            |                       |
| A. Programs considered major programs?  | _____ | _____      | _____                 |
|   |       | <u>Yes</u> | <u>No</u> <u>Init</u> |
| B. The dollar threshold used to distinguish type A and type B programs?   | _____ | _____      | _____                 |

C. If the auditee qualifies as low-risk? If not, explain. \_\_\_\_\_

5. Did the auditor become aware of fraud, abuse, or illegal acts? \_\_\_\_\_

A. Did the auditor prepare a separate written report describing the situation and possible effects on the financial statements? \_\_\_\_\_

B. A copy of the report and the agency response detailing action taken is included with the review. \_\_\_\_\_

### **REVIEWERS' OPINION**

The organization's independent audit report has been reviewed by the agency Executive Director, Fiscal Officer and Board Chairperson to determine that the basic reporting requirements of Generally Accepted Accounting Principles, Governmental Auditing Standards and OMB Circular A-133 were met.

If the independent audit does not appear to meet the aforementioned requirements, explain on a separate sheet to be attached and submitted with this review.

\_\_\_\_\_  
Executive Director (print name)

\_\_\_\_\_  
Executive Director's signature      Date

\_\_\_\_\_  
Fiscal Officer (print name)

\_\_\_\_\_  
Fiscal Officer's signature      Date

\_\_\_\_\_  
Board Chairperson (print name)

\_\_\_\_\_  
Board Chairperson's signature      Date

Today's Date \_\_\_\_\_



# State of South Carolina

## Office of the Governor

MARK SANFORD  
GOVERNOR

OFFICE OF EXECUTIVE  
POLICY AND PROGRAMS

### FISCAL/TECHNICAL ASSISTANCE MEMORANDUM F01- 05

**TO:** See Distribution  
**FROM:** Ann Harmon, Senior Manager of Fiscal Services  
**SUBJECT:** Cash Management of OEO Federally Funded Programs  
**DATE:** October 11, 2005

OMB Circular A-133, Compliance Supplement, (C.) Cash Management, Control Objectives, states, "To provide reasonable assurance that the draw down of Federal cash is only for immediate needs, States comply with applicable Treasury agreements, and recipients limit payments to subrecipients to immediate cash needs." In an effort to improve compliance with the Federally mandated Cash Management Act (CMIA) 31CFR 205 passed by Congress in 1990 as amended in 1992, the Office of Economic Opportunity (OEO) is revising procedures regarding cash management. **Effective January 1, 2006**, the beginning of the 2006 CSBG and LIHEAP program year and **April 1, 2006** for the Weatherization program year, disbursements to subgrantees will be processed by OEO as follows:

<b>First Payment:</b>	A check will be issued to subgrantees in an amount equal to twenty five percent (25%) of the allocation stated in and contingent on a subgrantee's executed grant agreement, approved work plan and budget and Federal availability.
<b>Second Payment:</b>	A check will be issued to subgrantees in an amount equal to twenty five percent (25%) of allocation stated in subgrantee's executed grant agreement contingent on the following compliance: OEO has received the Final Financial Status Report (FSR) of the previous grant period and current program year FSR documents expenditures, accruals, and obligations of at least twenty percent (20%) of the current budget.
<b>Third Payment:</b>	A check will be issued to subgrantees in an amount equal to twenty five percent (25%) of allocation stated in subgrantee's executed grant agreement contingent on the following compliance: OEO has received sub-grantees current program year FSR documenting expenditures, accruals, and obligations of at least forty percent (40%) of the current budget (should include prior program year unexpended.)
<b>Final Payments:</b>	A check will be issued to subgrantees in an amount equal to twenty five percent (25%) of allocation stated in subgrantee's executed grant agreement contingent on the following compliance: OEO has received sub-grantees current program year FSR documenting expenditures, accruals, and obligations of at least sixty percent (60%) of the current budget (should include prior program year unexpended.) If an agency cannot document

	expenditures, accruals, and obligations of at least 60%, the agency Executive Director should submit a letter of justification to the OEO Director explaining whatever extenuating circumstances may have prevented meeting the 60% goal. If the justification is accepted by the OEO Director, a check will be issued for the final 25% allocation. If the justification is not accepted, the check will be delayed and the OEO will make a training and technical assistance visit to the agency to determine the nature of the problem and to help the agency find a workable solution. Once the agency and the OEO have agreed to a workable solution, a check will be issued to the agency for the remaining 25 % allocation.
--	--

**Conditions of Payment:**

- **If Federal funding is awarded to the States based on a Continuing Resolution and/or Federal Authority is withheld, advance payments to subgrantees will be calculated based on the amount received. Adjustments will be made immediately upon the receipt of the notice of full year funding (Actual Award.)**
- **Agency's have executed grant agreements and approved Work Plans and Budgets.**
- **Payments will be made to subgrantees within 30 days of the receipt of an approved FSR documenting the required expenditures and compliance of conditions of payment.**
- **Payments will be subject to required expenditures and compliance of conditions of payments provided in agency's executed grant agreement. (LIHEAP Energy Assistance and DOE Weatherization)**

**Re-Allocation of Undisbursed Program Funds**

In recent years, it has become more the rule than the exception for Federal funding to the states to be delayed. Therefore, at the beginning of each grant period, agencies will be allowed to expend against their prior year unexpended funds based on the their most current approved work plan, budget, and signed grant agreement. This should ease the burden on CAAs of having to sustain programs during periods of delayed federal awards as they will be able to immediately begin expending against prior year funds. Close out procedures will continue as in previous years with actual prior year unexpended funds being incorporated in the first amendment budget.

If you have any questions, please call me at (803) 734-9828.

**DISTRIBUTION:**

State Association, Executive Director  
CAA Board Chairpersons  
CAA Executive Directors  
CAA Program Directors  
CAA Fiscal Officers  
OEO Director, Program, Fiscal and Audit Staff

## Population by Poverty Status in 1999 for Counties: 2000

Source: Census 2000 Sample Demographic Profiles (most data extracted from Table DP-3)

		Population for whom poverty status is determined		
		Below poverty level		
County Name	Total Population	Number in Poverty	Percent of Population at Poverty	Percent of State Poor Population
Abbeville	26,167	3,485	13.7%	0.636101%
Aiken	142,552	19,455	13.8%	3.551031%
Allendale	11,211	3,466	34.5%	0.632633%
Anderson	165,740	19,639	12.0%	3.584616%
Bamberg	16,658	4,403	27.8%	0.803659%
Barnwell	23,478	4,834	20.9%	0.882328%
Beaufort	120,937	12,194	10.7%	2.225715%
Berkeley	142,651	16,066	11.8%	2.932453%
Calhoun	15,185	2,439	16.2%	0.445179%
Charleston	309,969	49,330	16.4%	9.003977%
Cherokee	52,537	7,176	13.9%	1.309802%
Chester	34,068	5,157	15.3%	0.941283%
Chesterfield	42,768	8,561	20.3%	1.562600%
Clarendon	32,502	7,164	23.1%	1.307612%
Colleton	38,264	8,014	21.1%	1.462758%
Darlington	67,394	13,426	20.3%	2.450586%
Dillon	30,722	7,311	24.2%	1.334443%
Dorchester	96,413	9,108	9.7%	1.662441%
Edgefield	24,595	3,407	15.5%	0.621864%
Fairfield	23,454	4,518	19.6%	0.824650%
Florence	125,761	20,063	16.4%	3.662007%
Georgetown	55,797	9,439	17.1%	1.722857%
Greenville	379,616	38,825	10.5%	7.086548%
Greenwood	66,271	9,080	14.2%	1.657330%
Hampton	21,386	4,277	21.8%	0.780661%
Horry	196,629	23,356	12.0%	4.263063%
Jasper	20,678	3,996	20.7%	0.729371%
Kershaw	52,647	6,668	12.8%	1.217079%
Lancaster	61,351	7,599	12.8%	1.387010%
Laurens	69,567	9,648	14.3%	1.761005%
Lee	20,119	4,009	21.8%	0.731744%
Lexington	216,014	19,331	9.0%	3.528398%
McCormick	9,958	1,526	17.9%	0.278534%
Marion	35,466	8,117	23.2%	1.481559%
Marlboro	28,818	5,882	21.7%	1.073614%
Newberry	36,108	5,984	17.0%	1.092232%
Oconee	66,215	7,075	10.8%	1.291367%
Orangeburg	91,582	18,848	21.4%	3.440238%
Pickens	110,757	14,205	13.7%	2.592773%
Richland	320,677	40,386	13.7%	7.371470%
Saluda	19,181	2,951	15.6%	0.538632%
Spartanburg	253,791	30,394	12.3%	5.547677%
Sumter	104,646	16,451	16.2%	3.002725%
Union	29,881	4,230	14.3%	0.772082%
Williamsburg	37,217	10,294	27.9%	1.878916%
York	164,614	16,082	10.0%	2.935373%
<b>Total</b>	<b>4,012,012</b>	<b>547,869</b>		<b>100.000000%</b>

# COUNCILS OF GOVERNMENT

## APPENDIX M

<b>NAME: <u>SC Appalachian Council of Governments</u></b>			<b>TELEPHONE: 864-242-9733</b>	<b>FAX: 864-242-6957</b>
<b>ADDRESS: Post Office Drawer 6668</b>		<b>CITY: Greenville</b>	<b>STATE/ZIP CODE: SC 29606</b>	
<b>DIRECTOR: Bob Strother</b>		<b>CONTACTS: Dirk Reis, Judy Romano, Joe Smith</b>		
<b>COUNTIES: Anderson, Cherokee, Greenville, Oconee, Pickens, Spartanburg</b>				
<hr/>				
<b>NAME: <u>Upper Savannah Council of Governments</u></b>			<b>TELEPHONE: 864-941-8050</b>	<b>FAX: 864-941-8090</b>
<b>ADDRESS: Post Office Box 1366</b>		<b>CITY: Greenwood</b>	<b>STATE/ZIP CODE: SC 29648</b>	
<b>DIRECTOR: Patricia Hartung</b>		<b>CONTACTS: Ruth LaForge, Pam Davenport, Jeff Werts, Terri Nicoletti, Rick Green</b>		
<b>COUNTIES: Abbeville, Edgefield, Greenwood, Laurens, McCormick, Saluda</b>				
<hr/>				
<b>NAME: <u>Catawba Regional Planning Council</u></b>			<b>TELEPHONE: 803-327-9041</b>	<b>FAX: 803-327-1912</b>
<b>ADDRESS: Post Office Box 450</b>		<b>CITY: Rock Hill</b>	<b>STATE/ZIP CODE: SC 29731</b>	
<b>DIRECTOR: Harold Shapiro</b>		<b>CONTACTS: Grazier Rhea, Wendy Bell, Carol Mason-McMeekin</b>		
<b>COUNTIES: Chester, Lancaster, Union, York</b>				
<hr/>				
<b>NAME: <u>Central Midlands Regional Planning Council</u></b>			<b>TELEPHONE: 803-376-5390</b>	<b>FAX: 803-376-5394</b>
<b>ADDRESS: 236 Stoneridge Drive</b>		<b>CITY: Columbia</b>	<b>STATE/ZIP CODE: SC 29210</b>	
<b>DIRECTOR: Norman Whitaker</b>		<b>CONTACTS: John Huffman, Ken Shealey</b>		
<b>COUNTIES: Fairfield, Lexington, Newberry, Richland</b>				
<hr/>				
<b>NAME: <u>Lower Savannah Council of Governments</u></b>			<b>TELEPHONE: 803-649-7981</b>	<b>FAX: 803-649-2248</b>
<b>ADDRESS: Post Office Box 850</b>		<b>CITY: Aiken</b>	<b>STATE/ZIP CODE: SC 29802</b>	
<b>DIRECTOR: Wayne Rogers</b>		<b>CONTACTS: Nora Sanders</b>		
<b>COUNTIES: Aiken, Allendale, Bamberg, Barnwell, Calhoun, Orangeburg</b>				
<hr/>				
<b>NAME: <u>Santee-Lynches Council of Governments</u></b>			<b>TELEPHONE: 803-775-7381</b>	<b>FAX: 803-773-9903</b>
<b>ADDRESS: Post Office Box 1837</b>		<b>CITY: Sumter</b>	<b>STATE/ZIP CODE: SC 29150</b>	
<b>DIRECTOR: Jim Darby</b>		<b>CONTACTS: Delores Edwards</b>		
<b>COUNTIES: Clarendon, Kershaw, Lee, Sumter</b>				
<hr/>				
<b>NAME: <u>Pee Dee Regional Council of Governments</u></b>			<b>TELEPHONE: 843-669-3138</b>	<b>FAX: 843-669-4392</b>
<b>ADDRESS: Post Office Box 5719</b>		<b>CITY: Florence</b>	<b>STATE/ZIP CODE: SC 29502</b>	
<b>DIRECTOR: Johnny Brown</b>		<b>CONTACTS: Phil Goff</b>		
<b>COUNTIES: Chesterfield, Darlington, Dillon, Florence, Marion, Marlboro</b>				
<hr/>				
<b>NAME: <u>Waccamaw Regional Plan &amp; Dev. Council</u></b>			<b>TELEPHONE: 843-546-8502</b>	<b>FAX: 843-527-2302</b>
<b>ADDRESS: 1230 Highmarket St.</b>		<b>CITY: Georgetown</b>	<b>STATE/ZIP CODE: SC 29440</b>	
<b>DIRECTOR: C. Kenneth Thompson</b>		<b>CONTACTS: Thomas Langley</b>		
<b>COUNTIES: Georgetown, Horry, Williamsburg</b>				
<hr/>				
<b>NAME: <u>Berkeley-Charleston-Dorchester COG</u></b>			<b>TELEPHONE: 843-529-0400</b>	<b>FAX: 843-529-0305</b>
<b>ADDRESS: 5290 Rivers Avenue, Suite 400</b>		<b>CITY: N. Charleston</b>	<b>STATE/ZIP CODE: SC 29406</b>	
<b>DIRECTOR: Ron Mitchum</b>		<b>CONTACTS: Vanessa Sullivan</b>		
<b>COUNTIES: Berkeley, Charleston, Dorchester</b>				
<hr/>				
<b>NAME: <u>Lowcountry Council of Governments</u></b>			<b>TELEPHONE: 843-726-5536</b>	<b>FAX: 43-726-5165</b>
<b>ADDRESS: Post Office Box 98</b>		<b>CITY: Yemassee</b>	<b>STATE/ZIP CODE: SC 29945</b>	
<b>DIRECTOR: L. Chriswell Bickley</b>		<b>CONTACTS: Michelle Knight, Barbara Johnson, Gwen Coath, Holly Crews, Sherry Smith</b>		
<b>COUNTIES: Beaufort, Colleton, Hampton, Jasper</b>				

Agency Name: \_\_\_\_\_

**MORTGAGE ASSISTANCE AFFIDAVIT**

Let it be known that I, \_\_\_\_\_, am the mortgage holder for (Mortgagee), \_\_\_\_\_  
 \_\_\_\_\_ residing at \_\_\_\_\_.

I have not received a payment since \_\_\_\_\_ causing the homeowner to be \_\_\_\_\_  
 month(s) delinquent. I consider the homeowner's delinquency serious and require immediate attention.

Total Amount due to-date is	\$ _____
Mortgage Payment Insurance Amount (deduct)	\$ _____
Mortgage Payment Taxes Amount (deduct)	\$ _____
Mortgage Payment Other Insurance Amount (deduct)	\$ _____
Total Monthly Mortgage Payment	\$ _____
Mortgage Payment Amount (less taxes and insurances)	\$ _____

**Total Amount Paid by this Agency toward delinquency** \$ \_\_\_\_\_

I understand that any misrepresentation of information on this form will result in an investigation and possibly prosecution of the parties involved.

\_\_\_\_\_  
 Mortgage Holder Representative                      Date

\_\_\_\_\_  
 Mortgage Holder Address                      City, State, Zip Code                      Telephone Number

\_\_\_\_\_  
 Attest                      Date

I, \_\_\_\_\_, understand that, if approved for assistance, I am only eligible for this service once during the program year based upon my ability to sustain and my ability to adhere to a case management plan, as applicable.

\_\_\_\_\_  
 Homeowner's Signature                      Date

I, the agency representative, attest by my signature below that I have verified that this client will be able to sustain once this assistance is provided.

\_\_\_\_\_  
 Agency Representative                      Date                      Attest



**SUBGRANTEE SEMI-ANNUAL NARRATIVE REPORT**

(To be submitted for key activities/milestones where actual compared to projected vary by more than 20%)

A. Agency: \_\_\_\_\_

B. CSBG Program: \_\_\_\_\_

C. Goal: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Measure/Performance Target (Defines program achievement): \_\_\_\_\_

\_\_\_\_\_

E. Client Activity/Milestone: (# ) \_\_\_\_\_

\_\_\_\_\_

F. Strategies Implemented/Learning/Assumptions: (during quarter completed) (What did you learn and/or have you already done something differently?) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

G. Additional Course Corrections or Strategies: (for upcoming quarter) (What steps do you propose for next quarter to get closer to your activities/milestones, including technical assistance, staff training?) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ H.

Activity/Milestone Modification Requested (Do you request a revision?) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I. Effect on Measure/Performance Target Outcome Achievement: (if above modification is made) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

J. Action or Revision Agreed to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Outcomes of Efforts				
Section B: Description of Measures & Results		Circle One of the Below Quarterly Designations		
		1	2	3

Agency reporting: \_\_\_\_\_

Total CSBG Funding in agency reporting: \$\_\_\_\_\_

Chart #\_ of 6 / Goal # \_\_\_\_\_ of 6

Measure (Performance Target)	Eligible Entities Reporting  (#)	Service Category	Type of Unit	Units  (x of Target) (#)	Expected to Achieve the Outcome in Reporting Period (y of Target) (#)	Achieved  (#)	Still Progressing Toward Outcome (Target) (#)	Exited Program Prior to Achieving Outcome (Target) (#)
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I

PY 2006 YOUTH LEADERSHIP PROGRAM

**Parental Permission, Disclosure Authorization and Release Form**

I give permission for my child to participate in the FY 2006 Youth Leadership Program that is being sponsored by (agency)\_\_\_\_  
\_\_\_\_\_. Additionally, I hereby authorize the agency officials to request,  
access, receive, apply, disseminate, etc., any information regarding my current household income to potential service providers  
(vendors, human service agencies, educational/religious/governmental organizations) as necessary to assist my household.

Parent/Guardian's Name \_\_\_\_\_ SSN \_\_\_\_\_

Student's Name \_\_\_\_\_ SSN \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ Grade \_\_\_\_\_

School Principal \_\_\_\_\_ Counselor \_\_\_\_\_

(Name of school)\_\_\_\_\_ has my permission to release information from my child's  
school records to (agency)\_\_\_\_\_. I understand that such information will be used in the FY  
2006 Youth Leadership Program to service my child's needs.

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Witness \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Agency Representative \_\_\_\_\_ Date \_\_\_\_\_

PY 2006 YOUTH LEADERSHIP PROGRAM

**Field Trip Permission Slip**

(Student)\_\_\_\_\_ has my permission to participate in this planned field trip with the Youth Leadership Program. I will not hold (agency)\_\_\_\_\_ responsible in the event an accident should occur. The following field trip has been approved for:

Destination \_\_\_\_\_ Purpose \_\_\_\_\_

Departure Date/Time \_\_\_\_\_ Return Date/Time \_\_\_\_\_

Home Telephone \_\_\_\_\_ Emergency Telephone \_\_\_\_\_

Allergies \_\_\_\_\_ Medicines \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Physician \_\_\_\_\_ Telephone \_\_\_\_\_

Physician's Address \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Student's Contract**

I, (name of student)\_\_\_\_\_ agree to participate in a mature and responsible manner. I understand that if I am not dressed appropriately and have not returned my permission slip, I will not be allowed to attend this field trip.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

## South Carolina Youth Leadership Program Student Pre Evaluation / Post Evaluation

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

**For each statement respond by circling one answer. Your answer may range from (1) "not important" to (5) "very important."**

	Very Important	Important	Unsure	Somewhat Important	Not Important
1. How important is it to you to be honest and direct?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. How important is it to you to demonstrate commitment, courage and self-discipline?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. How important is it for you to have integrity and keep your promises?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. How important is self-respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. How important is it to you to stand up for what is right, even if you stand alone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. How important is peer pressure to you in making your choices?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. How important is it to you to know that your character is defined by what you do, not what you say or believe?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. How important is it to you to understand that every choice you make has a consequence and others are often affected by your actions and decisions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. How important is it to you to stay focused, always do your best and not give up just because things seem difficult?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. How important is it to you to listen to the opinions of others?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. How important is it to you to treat all people fairly and equally?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. How important is it to you to consider the feelings, cultures and differences of other people?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. How important is it to you to be thankful and express gratitude to others for what they do for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. How important is it to you to share with others?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. How important is it to you to be kind, caring, helpful and compassionate?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. How important is it to you to participate in community service?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. How important is it to you to obey laws and respect authority?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. How important is it to you to do your part in taking care of the environment?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Carefully answer the following. There are no right or wrong answers. You need to identify what makes you a unique individual and to think about your life goals.**

1. Make a list of all of the classes, activities, and clubs that you enjoy.

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2. Identify three of your strongest skills (e.g. sports, music, academics, art, helping other people).

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3. What five words would you use to describe yourself?

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4. List three life goals that you have or would like to set for yourself (e.g. high school graduation, college graduation, employment, financial security, marriage, family, home ownership).

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5. List three things that are important to you (e.g. spending time outdoors, sports, having a lot of money, boyfriend/girlfriend, having a nice car, attending school).

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6. List your top 3 role models.

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7. List two people with whom you enjoy spending time.

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YLP Instructor: \_\_\_\_\_

Signature: \_\_\_\_\_

# South Carolina Youth Leadership Program Evaluation

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

To the student: During the school year you were selected to participate in the Youth Leadership Program using "Lessons In Character". Now we are asking that you let us know your honest opinion of the program.

**For each statement respond by circling one answer. Your answer may range from (1) "strongly disagree" to (5) "strongly agree."**

[illegible]

Please provide a general explanation of your answers to the above questions as a whole.

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In your opinion, what can be done to improve this program.

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List the most positive ideas you have gained from this program.

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List any negative aspects of the program.

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Other comments:

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Signature:\_\_\_\_\_



# APPLICATION FOR PROGRAM SERVICE

UPDATE:  1  2

APPLICATION NUMBER:    

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☐ NEW APPLICANT      ☐ APPLICANT ON FILE      ☐ HBA

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**LAST NAME**

AREA CODE

HOME ADDRESS

MAILING ADDRESS (if different)

LOCATION: ☐ CITY ☐ RURAL

<b>RACE:</b>	<input type="checkbox"/> WHITE	<input type="checkbox"/> BLACK	<input type="checkbox"/> HISPANIC	<input type="checkbox"/> MULTI-RACE	<input type="checkbox"/> OTHER
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**ETHNICITY:** ☐ HISPANIC/LATINO ☐ NOT HISPANIC/LATINO

**MARITAL STATUS:** ☐ SINGLE ☐ MARRIED ☐ WIDOWED ☐ DIVORCED ☐ SEPARATED

**HOUSING STATUS:** ☐ OWNED ☐ RENTED ☐ SUBSIDIZED ☐ SHELTER ☐ HOMELESS

**FAMILY TYPE:** ☐ SINGLE PARENT FEMALE ☐ SINGLE PARENT MALE ☐ 2-PARENT HSEHLD

☐ SINGLE ☐ 2 w/NO CHILDREN

INDICATE TOTAL MONTHLY AMOUNT FOR ALL HOUSEHOLD MEMBERS RECEIVE FOR: \$  \$

FOOD STAMPS	WIC
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**EMPLOYMENT:**☐ YES☐ NO

**OCCUPATION:** ☐ LABORER ☐ SKILLED ☐ SALES ☐ PROFESSIONAL ☐ RETIRED ☐ STUDENT ☐ CLERICAL

NAME	SSN	RELATION TO APPLICANT	DISABLED Y / N w/proof	BIRTH DATE MM/DD/YY	INS.	SEX	LAST GRADE COMPL	INCOME SOURCE CODE	TOTAL GROSS MONTHLY INCOME
1. APPLICANT	APPLICANT	APPLICANT							\$
2.									\$
3.									\$
4.									\$
5.									\$
6.									\$
TOTAL MONTHLY INCOME OF ALL HOUSEHOLD MEMBERS (EXCLUDE CHILD SUPPORT, FOOD STAMPS, WIC, COLLEGE FUNDING)									\$

**INCOME SOURCE OF ALL HOUSEHOLD MEMBERS (Round to Nearest Dollar)**

1)	MONEY, WAGES, SALARIES	\$
2)	SSI	\$
3)	RETIREMENT, PENSION OR INS	\$
4)	UNEMPLOYMENT COMPENSATION	\$
5)	SOCIAL SECURITY	\$
6)	WELFARE	\$
7)	ALIMONY	\$

8)	RENT INCOME	\$
9)	VETERAN'S BENEFITS	\$
10)	TANF	\$
11)	LOTTERY WINNINGS	\$
12)	ZERO INCOME	\$
13)	TRAINING STIPENDS	\$
14)	OTHER	\$

**TOTAL MONTHLY INCOME SOURCES FOR ALL HOUSEHOLD MEMBERS (EXCLUDES CHILD SUPPORT AND COLLEGE FUNDING) \$**

I certify that all the above information is correct and may be used for household and income verification to include zero income verification for statistical purposes. I authorize agency employees to contact any former employers and/or Social Service agencies to verify household income for the past thirty (30) days.

I certify that reasonable attempts have been made to verify the above-reported household and income information. I further certify that documentation to verify same is included in the applicant's official file/record.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_

**DATE:**                    /                    /

**AGENCY'S REPRESENTATIVE:**

**DATE:**                    /                    /

**AREAS OF NEED:** ☐ EMPLOYMENT ☐ EDUCATION ☐ HOUSING ☐ NUTRITION ☐ HEALTH ☐ EMERGENCY  
☐ ENERGY ☐ INCOME MANAGEMENT ☐ OTHER

**PROGRAMS APPLIED FOR AND ELIGIBILITY:** ☐ CSBG ☐ GEAP ☐ LIHEAP DA ☐ LIHEAP ECIP ☐ WAP  
☐ CSBG CASE MANAGEMENT ☐ PROJECT SHARE ☐ NOT ELIGIBLE

Program Services

Date: \_\_\_\_\_

Last Name : \_\_\_\_\_ First Name: \_\_\_\_\_

☐ CSBG ☐ LIHEAP ☐ PS-SCE&G ☐ PS-Duke ☐ ENF – Progress Energy

**CSBG**

Type Service: \_\_\_\_\_

Emergency: ☐ Yes ☐ No

Type of Emergency: \_\_\_\_\_

☐ In Crisis ☐ At Risk  
☐ Stable ☐ Self-Sufficiency  
☐ Thriving

Was Applicant Referred? ☐ Yes ☐ No

If Yes, Agency Outcome: \_\_\_\_\_

Was Applicant Case Managed? ☐ Yes ☐ No

125%		
2005 HHS Poverty Guidelines		
Family Unit	Monthly Income	Yearly Income
1	\$ 997	\$11,963
2	\$1,301	\$16,038
3	\$1,676	\$20,113
4	\$2,016	\$24,188
5	\$2,355	\$28,263
6	\$2,695	\$32,338
7	\$3,034	\$36,413
8	\$3,374	\$40,488

**LIHEAP – Project Share - SCE&G and Duke Power. Energy Neighbor Fund – Progress Energy**

Type Service: ☐ Direct Asst. ☐ ECIP

Type Assistance: ☐ Cooling ☐ A/C  
☐ Heating ☐ Heater

Primary Heating Fuel: \_\_\_\_\_

Secondary Heating Fuel: \_\_\_\_\_

Housing Type: \_\_\_\_\_

Sub. Complex Name: \_\_\_\_\_

Cooling Device: \_\_\_\_\_

House Structure: \_\_\_\_\_

100%			150%		
2005 HHS Poverty Guidelines			2005 HHS Poverty Guidelines		
Family Unit	Monthly Income	Yearly Income	Family Unit	Monthly Income	Yearly Income
1	\$ 797	\$ 9,570	1	\$1,196	\$14,355
2	\$1,069	\$12,830	2	\$1,604	\$19,245
3	\$1,341	\$16,090	3	\$2,011	\$24,135
4	\$1,612	\$19,350	4	\$2,419	\$29,025
5	\$1,884	\$22,610	5	\$2,826	\$33,915
6	\$2,156	\$25,870	6	\$3,234	\$38,805
7	\$2,427	\$29,130	7	\$3,641	\$43,695
8	\$2,699	\$32,390	8	\$4,049	\$48,585

Was applicant referred? ☐ Yes ☐ No

If yes, where? \_\_\_\_\_

**Calculating Poverty Percentages:**

Divide the total monthly income by the amount listed according to family size on the **100%** 2005 HHS Poverty Guidelines Table.

Example: Total monthly income for two people in household is \$1,400  
**100% Table for 2 people is \$1,069. 1,400 divided by 1,069 = 130%**

☐ Under 75% ☐ 75% - 100%

☐ 101% - 125% ☐ 126% -150% ☐ Over 150%

	Direct Assistance	ECIP
Monthly Energy Expense:	\$	\$
	<b>\$ 1 1 0</b>	
Child Age 5 or less: \$20	\$	
Energy Burden: \$20	\$	
Elderly Age 60+: \$50	\$	
Disabled: \$50	\$	
Income-100% or less:\$50	\$	
Heater/Air Conditioner:		\$
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

Energy Bill Amt.: \$ \_\_\_\_\_

Applicant Acct. #: \_\_\_\_\_

Voucher Date: \_\_\_\_\_

Voucher Amount: \$ \_\_\_\_\_

**CASE MANAGEMENT FORM****HEAD OF HOUSEHOLD****Customer Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_

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**Status after visit: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_****Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_

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**Status after visit: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_****Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_

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**Status after visit: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_****Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_

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**Status after visit: In Crisis: \_\_\_ At Risk: \_\_\_ Stable:\_\_\_ Safe:\_\_\_ Thriving:\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_**

**CASE MANAGEMENT****FAMILY MEMBER FORM****Customer Name:** \_\_\_\_\_ **Household member relationship:** \_\_\_\_\_**Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

**Status after visit: In Crisis:** \_\_\_\_ **At Risk:** \_\_\_\_ **Stable:** \_\_\_\_ **Safe:** \_\_\_\_ **Thriving:** \_\_\_\_ **FOLLOW-UP DATE:** \_\_\_\_\_**Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

**Status after visit: In Crisis:** \_\_\_\_ **At Risk:** \_\_\_\_ **Stable:** \_\_\_\_ **Safe:** \_\_\_\_ **Thriving:** \_\_\_\_ **FOLLOW-UP DATE:** \_\_\_\_\_**Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

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**Status after visit: In Crisis:** \_\_\_\_ **At Risk:** \_\_\_\_ **Stable:** \_\_\_\_ **Safe:** \_\_\_\_ **Thriving:** \_\_\_\_ **FOLLOW-UP DATE:** \_\_\_\_\_**Date:** \_\_\_\_\_ **Case Worker:** \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

**Status after visit: In Crisis:** \_\_\_\_ **At Risk:** \_\_\_\_ **Stable:** \_\_\_\_ **Safe:** \_\_\_\_ **Thriving:** \_\_\_\_ **FOLLOW-UP DATE:** \_\_\_\_\_

Customer Name: \_\_\_\_\_

Date: \_\_\_\_\_

Case Worker: \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

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Status after visit: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_

Date: \_\_\_\_\_

Case Worker: \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

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Status after visit: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

Date: \_\_\_\_\_

Case Worker: \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

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Status after visit: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_

Date: \_\_\_\_\_

Case Worker: \_\_\_\_\_

Current Status: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_

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Status after visit: In Crisis: \_\_\_\_ At Risk: \_\_\_\_ Stable: \_\_\_\_ Safe: \_\_\_\_ Thriving: \_\_\_\_ FOLLOW-UP DATE: \_\_\_\_\_

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